

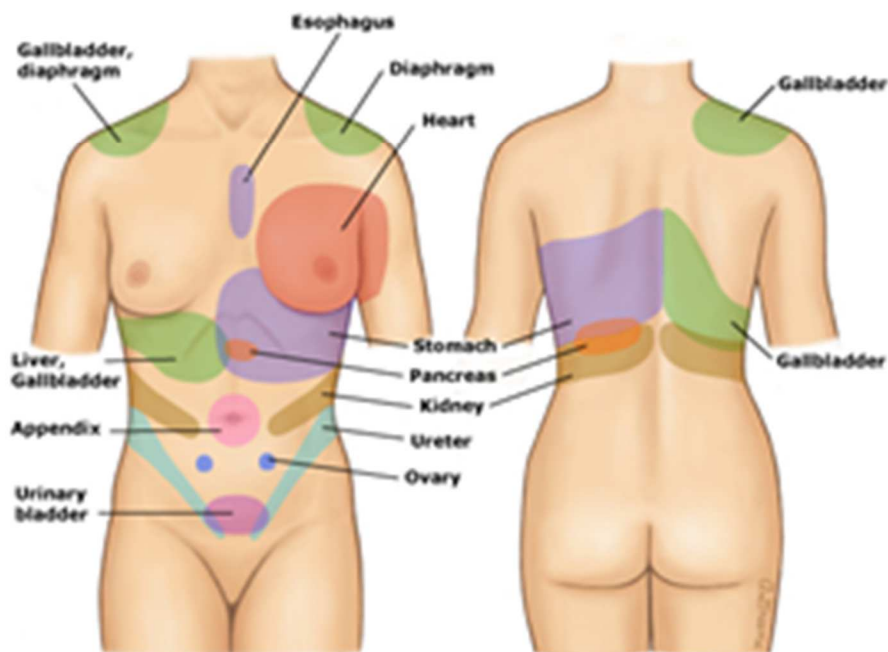
Abdominal Pain



How do we feel pain in the abdomen?

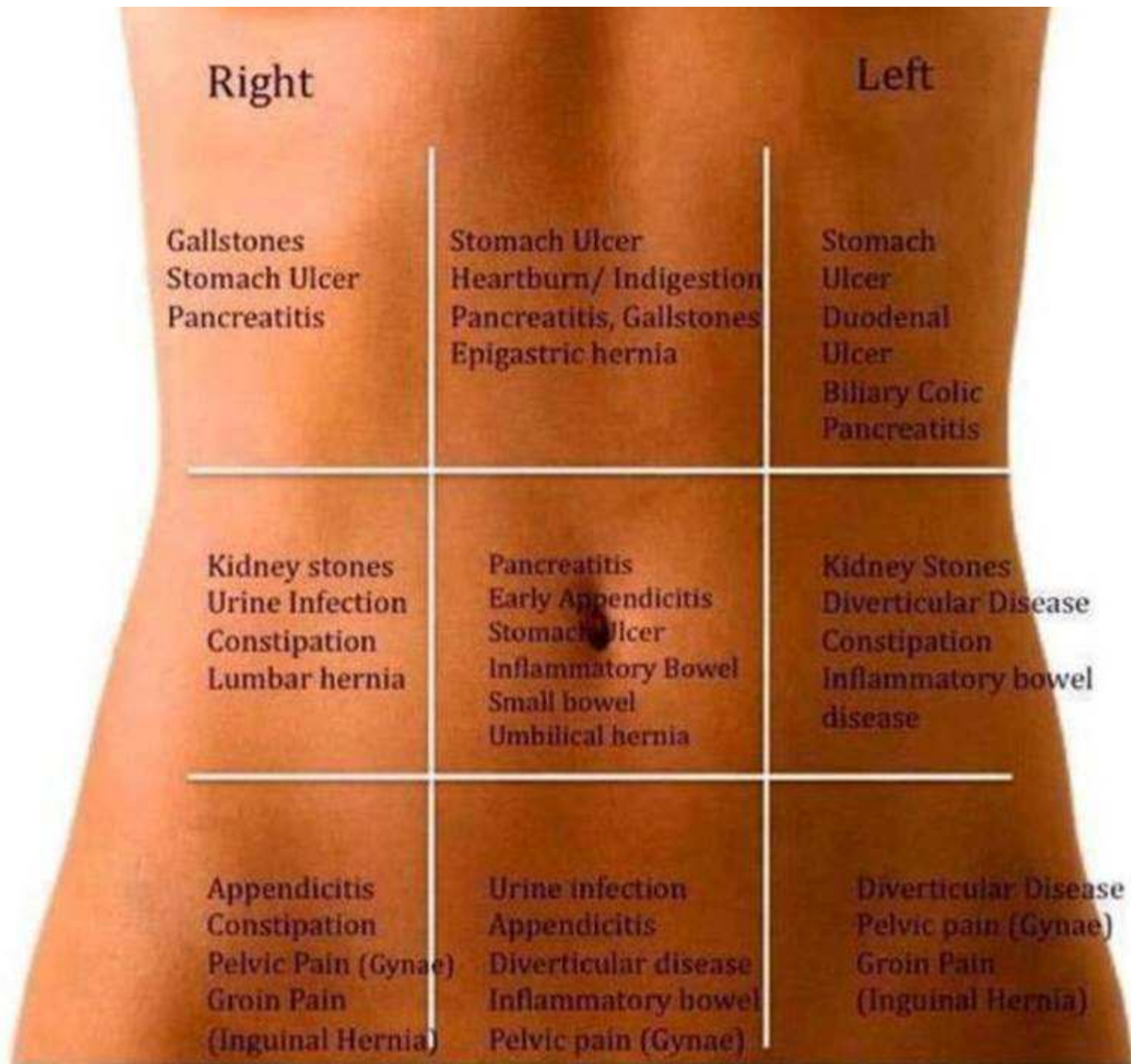
- Stretch is the main stimulus but distention, contraction, traction, compression, and torsion are causes.
- Most digestive tract pain is felt in the midline but distension of the small intestine is usually felt in the periumbilical region
- **Referred pain** – Some pain may be felt in a far off site. For example, pain from an inflamed gallbladder may be felt in the scapula.
- The quality of referred pain is aching and perceived to be near the surface of the body.

Patterns of referred abdominal pain



Pain from abdominal viscera often (but not always) localizes according to the structure's embryologic origin, with foregut structures (mouth to proximal half of duodenum) presenting with upper abdominal pain, midgut structures (distal half of duodenum to middle of the transverse colon) presenting with periumbilical pain, and hind gut structures (remainder of colon and rectum, pelvic genitourinary organs) presenting with lower abdominal pain. Radiation of pain may provide insight into the diagnosis. As examples, pain from pancreatitis may radiate to the back while pain from gallbladder disease may radiate to the right shoulder or subscapular region.

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RUQ pain

- Gall stones
- Cholecystitis
- Hepatitis
- Liver abscess



Epigastric pain

- Acute MI
- Peptic Ulcer Disease
- Pancreatitis
- GERD
- Functional dyspepsia
- Gastroparesis

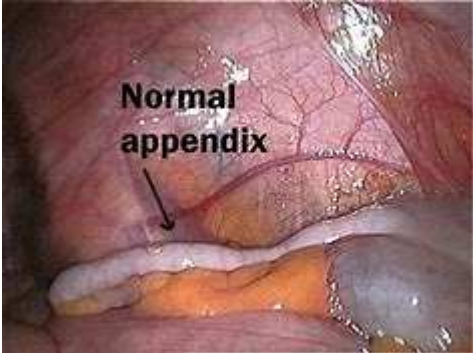


LUQ pain

- Enlarged spleen
- Spleen rupture
- Spleen infarct
- Spleen abscess

Lower abdominal pain

- **Acute appendicitis** – Acute appendicitis presents with periumbilical pain initially that radiates to the right lower quadrant.
- **Diverticulitis** – Left lower quadrant pain is the most common complaint, occurring in 70 percent of patients. The pain is usually constant and is often present for several days prior to presentation.



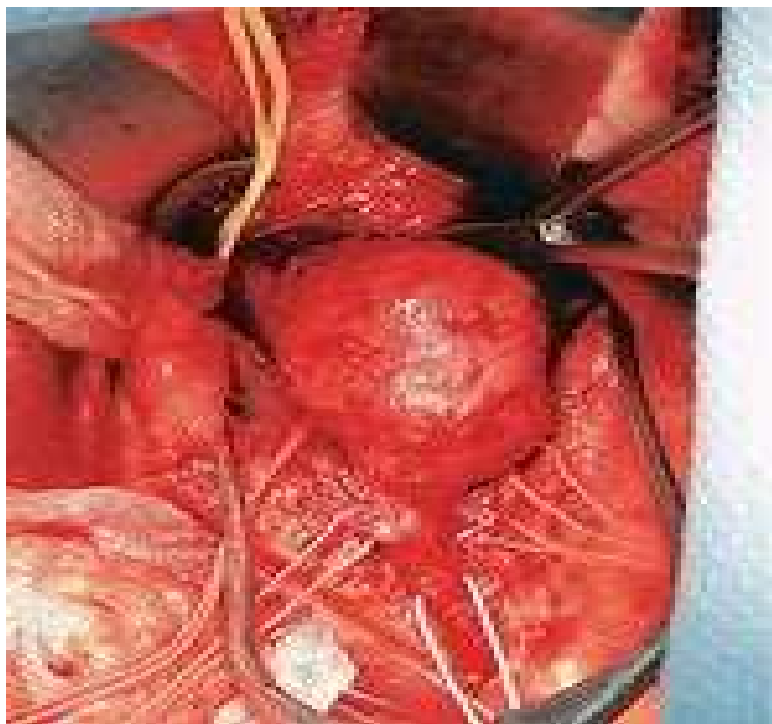


- Kidney stones
- Kidney infection
- Cystitis
- Urinary retention
- Infectious colitis

Diffuse Abdominal Pain

- Obstruction
- Perforation
- Ischemia
- Ulcerative Colitis
- Crohns disease
- Viral gastroenteritis
- Peritonitis
- Malignancy

- Foodborne disease
- IBS
- Constipation
- AAA
- Narcotic bowel syndrome
- Renal infarction
- Sickle Cell crisis



Clinical Assessment

- How long has the pain been present? – onset, frequency and duration
- Location/radiation
- Quality – burning, gnawing, cramping
- Severity
- What helps, what hurts
- Other symptoms- fever, nausea, vomiting, diarrhea etc.