# السنة الثانية ـ الفصل الثاني الجهاز الهضمي The Digestive System (0500251) (6) Credit Hours

## **Objectives:**

By the end of this course, the student should be able to:

- 1. Describe the gross and micro anatomy of the digestive system as well as the development of organs of the system.
- 2. Mention the biochemical constituents of saliva, stomach juice, bile and pancreatic secretions and their functions.
- 3. Describe the functions of the different organs of the system.
- 4. Describe the process of digestion and absorption of food.
- 5. List pathologic disorders of the GI systems.
- 6. Mention drugs used in the treatment of GI diseases.
- 7. Discuss the Epidemiology of diseases of the GI system, their prevention and control.
- 8. Take proper history and perform physical examination of the GI system.

### Content Summary:

(1) Anatomy 24 : 14 Lecture + 10 Lab Histology 4 : 2 Lecture + 2 Lab

Embryology2 : 2 Lect

Total 30 hrs

(2) Biochemistry: 4 Lecture

Total 4 hrs

(3) Physiology : 9 Lecture + 2 Lab

Total 11 hrs

(4) Community Med : 2 Lecture

Total 2 hrs

(5) Pathology : 12 Lecture + 3 Lab

Total 15 hrs

(6) Microbiology: 12 Lecture + 2 Lab

Total 14 hrs

(7) Pharmacology: 4 Lecture

Total 4 hrs

(8) Clinical aspects : 10 hrs

# (1) Anatomy, Histology & Embryology 30 hrs Anatomy:

- Anterior abdominal wall
- Rectus sheath inguinal canal spermatic cord
- Peritoneum
- Abdominal viscera (stomach, small intestine, large intestine, liver gall bladder, pancreas)
- Posterior abdominal wall

vesseles of posterior abdominal wall nerves of posterior abdominal wall

### **Histology:**

- the lip, teeth, sublingual, submandibular & parotid glands

- Dental Histology, vallate and filiform papilla of the tongue
- oesophagus, stomach, duodenum, jeunum, ileum & colon
- Pancreas- liver and galbladder

## **Embryology:**

- The foregut development of the esophagus, stomach, duodenum development of the liver, gallbladder and biliary apparatus development of the spleen
- The midgut rotation of the midgut loop fixation of the intestin
- The cecum and appendix
- The Hindgut the cloaca the anal canal

## (2) Biochemistry 4 hrs

- Constituents of the saliva. Gastric constituents and production of gastric HCl
- Constituents of pancreatic secretions. Constituents of intestinal secretions
- Composition of hepatic and gall-bladder bile & bile acids
- Absorption of biochemicals
- Investigation of liverdiseases disorders & pancreatic enzymes

## (3) Physiology 11 hrs

- Introduction of GI Physiology

Physiology of smooth muscle Neural hormonal control of GI Blood flow and GI activities

GI motility:

Mastication and swallowing

Gastric motor activities and control Small intestinal movements and control

Defecation and control

GI secretions:

Introduction to secretions

Salivary secretion, Mechanisms of secretion, Function, Control

Gastric secretion, Mechanisms, Function, Control

Intestinal secretions

Pancreatic secretion, Mechanisms, Function, Regulation Liver and Galbladder: Bile secretion, Function, Control

### Digestion and Absorption:

Intestinal specialization

Digestion and Absorption of Carbohydrates

Digestion and Absorption of Proteins

Digestion and Absorption of Lipids

Absorption of water, electrolytes, Ca++, Fe++

Absorption of Vitamins

Body Energetics, Dietary balance and Regulation of food intake

# (4) Community medicine 2 hrs

Investigation of the digestive diseases

## (5) Pathology 15 hrs

## **ESOPHAGUS**

Hiatal hernia

Achalasia

Lacerations

Other anatomic & motor disorders

Varices

### **Esophagitis**

Types, mechanisms & appearances

## **Barrett's Esophagus**

#### Carcinoma

Types, epidemiology, clinical

Morphology

#### **Stomach**

## **Acute Gastritis**

#### **Chronic Gastritis**

Types (superficial atrophic, granulomatous...etc)

Gastric atrophy

Mechanisms, pathogenesis, morphology

## **Peptic Ulcer**

Pathogenesis, epidemiology

Morphology, complications

Clinical

#### **Tumours**

Polyps, other benign

Malignant tumours

Carcinoma, types, morphology, clinical, outcome & risk factors

Lymphoma

Carcinoid

Other

## **LOWER GI TRACT DISEASES**

## **Congenital Anomalies**

Meckels

A tresia and stenosis

Imperforate anus

Hirschsprung disease

Ischemic Bowel disease

Angiodysplasia

Hemorrhoids

Diarrheal diseases

Infection enterocolitis

Idiopathic inflammatory bowel disease

Crhon's Disease

Ulcerative colitis

Diverticulosis

- Tumors

Benign (polyps)

Malignant

## LIVER PATHOLOGY

#### **Definitions**

Cirrhosis

Hepatic encoepholopathy

Jaudice

Cholestarios

### **Hepatitis**

Viral

Antoimmune

## Liver abscess

Drug induced liver disease

Alcoholic liver disease

Hemochromatosis

Antitrypsihdeficiency

Rye's syndrome

Billiary cirrhoses

Cholargitins

Congenital anomalies of the biliary tree

Vascular disorders of the liver

Liver transplantation

Tumors of the liver

#### GALBLADDER DISEASE

Gall stones

Cholecystios

Tumors and associated disease

Injury iatrogenic

Extrahepatic bile duct disorders

Choledoclithiasis

Ascending cholangitis

Choledochal cyst

### **PANCREAS**

Congenital anomalies

Cystic fibrosis

**Pancreatitis** 

tumors

## (6) Microbiology 14 hrs

## Natural defense of the gastrointestinal tract

Normal flora

Immune responses

## **Viral infections of theintestinal Tract**

Rotavirus

Adenoviruses

Calciviruses

Astroviruses

Enteroviruses

# **Bacterial infections of the gastrointestinal tract:**

Campylobacter

Vibriospecies

Diarrhia agent

Salmonell

Plesiomonas

Food poisning agent

Shigella

Yersinia

E. coli

Helicobater

Clostidum perfringer

cereus

Clostridium difficile

botulinum

### Parasitic infections of the Gastrointestinal Tract

Protozoa:

Giardia lamblia

Cryptosporidium parvum

Entameba histolytica

## **Helminths:**

Enterobius vermicularis

Trichuris trichiura

Ascaris lumbricoides

Hook worms

Strongyloides stercoralis

**Tapeworms** 

**Trematodes** 

## **Bacterial Infection of the liver**

Leptospira spp

Coxiella burnettii

Brucella spp

Mycobacterium

## **Viral Infections of the liver**

EBV, CMV, YF and others

Hepatitis A virus

Hepatitis E virus

Hepatitis B virus

Hepatitis D virus

Hepatitis E virus

## **Epidemiology**

Pathogenesis

Clinical featres

Diagnosis

Prevention and control

## **Parasitic Infections of the liver**

Schistosomes

Hydatid disease

Fasciola hepatica

# (7) Pharmacology 4 hrs

Drugs in peptic ulcer disease

Antidiarrheal, Laxatives, Antispasmodic drugs

Emetics, antiemetics

Drugs in G.I.T inflammatory conditions.

### (8) Clinical aspect 10 hrs

## SYMPTOMS AND SIGNS

Painful mouth

Dysphagia and Odynophagia

Regurgitation and Belching

Heartburn

Nausea and Vomiting

Abdominal pain

Dyspepsia

Anorexia and Weight loss

Flatulence

Abdominal distension-(bloating)

Altered bowel habits

Rectal bleeding-Tenesmus

Hiccups

Jaundice

Abdominal masses

Ascitis

Hernial orifices and Hernias

# HISTORY TAKING AND EXAMINATION OF THE ABDOMEN AND G.I SYSTEM

Regions of the abdomen

General approach

**Inspection:** Hair, Skin, Umbilicus, Contour of the abdomen Peristalsis, Pulsation's, Veins, Movements, and Hernias

## **Palpation:**

Light palpation, Deep Palpation, Palpation of the liver, Dipping technique, Palpation of the spleen, Palpation of the kidneys.

### **PERCUSSION:**

The distended aabdomen, the liver the spleen, Assessing for Ascitis. (Shifting dullness and Fluid Thrill)

### **AUSCULTATION:**

Bowel sounds, Arterial bruits, Venous Hum, Friction sounds, and Succession splash

**EXAMINATION** of the Hernial orifices and external genitalia

### **Ano-rectal examination:**

Inspection of the anal area Digital rectal examination Proctoscopic examination