

Upper GI Bleeding in Children

What is upper GI Bleeding?

Irritation and ulcers of the lining of the esophagus, stomach or duodenum can result in upper GI bleeding. When this occurs the child may vomit blood that can be either bright red or even dark-looking flecks of blood that are often described as “coffee grounds”. Sometimes, upper GI bleeding can cause black, sticky stools (melena).

How common is upper GI bleeding?

Pediatricians and pediatric gastroenterologists see this problem quite regularly. It is estimated that GI bleeding accounts for 1% of all pediatric hospitalizations.

Why does bleeding happen?

Stomach acid can irritate the lining of the esophagus to the point of causing bleeding. In other cases, retching or repeated vomiting can cause a tear in the lining of the lower esophagus (a Mallory-Weiss tear). Sometimes liver problems can cause blood vessels in the esophagus or stomach to be enlarged, and these blood vessels may be more likely to bleed.

Certain medications such as non-steroidal anti-inflammatory drugs (ibuprofen, aspirin) can cause irritation or ulcers that bleed. Infections, particularly *Helicobacter pylori*, can result in bleeding ulcers.

Uncommon causes of upper GI bleeding are polyps and abnormal blood vessels.

How is upper GI bleeding treated?

Upper endoscopy is the best way to determine the cause of the upper GI bleeding and will be recommended if the bleeding has been serious. In this test, a flexible tube with a tiny video camera is used to look directly at the upper GI tract. If active bleeding is

seen, it can be stopped by numerous methods including injection of medicines, heating/burning the abnormal site, or placing metal clips to close any bleeding blood vessels.

More commonly, upper GI bleeding is treated with medications that decrease the stomach's acid, allowing the lining of the upper GI tract to heal.

What can we expect?

Most children with upper GI bleeding recover very well. Those with special liver or blood clotting problems may have more serious and repeated bleeding episodes. Blood transfusions or surgery might be indicated in the more severe cases.

Management in the hospital by pediatric specialists will help provide optimal care.

For more information or to locate a pediatric gastroenterologist in your area please visit our website at: www.naspghan.org

IMPORTANT REMINDER: This information from the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN) is intended only to provide general information and not as a definitive basis for diagnosis or treatment in any particular case. It is very important that you consult your doctor about your specific condition.



SPECIFIC INSTRUCTIONS :

LINKS:

National Digestive Disease Information Clearinghouse (NDDIC)

<http://digestive.niddk.nih.gov/ddiseases/pubs/bleeding/index.htm>

American College of Gastroenterology

<http://www.acg.gi.org/patients/pdfs/UnderstandGI/Bleednew.pdf>

Medline Plus- U.S. National Library of Medicine/NIH

<http://www.nlm.nih.gov/medlineplus/gastrointestinal/bleeding.html#cat8>

