

# Findings of GI physical examination

## Striae :

- Rapid wt. gain., Pregnancy, Cushing Disease.

## Clubbing :

- IBD, Cirrhosis, Celiac, chronic liver disease

## Koilonychias :

- Iron deficiency anemia

## Leukonychia :

With conditions that decrease protein :

- Chronic Liver Disease.
- Protein calorie Malnutrition (Kwashiorkor).
- Malabsorption protein-losing enteropathy (Celiac disease).
- Heavy & prolonged Proteinuria (Nephrotic Syndrome).

## Dupuytren's Contracture :

- Associated with Alcohol-related chronic liver disease.

## Palmar erythema :

- Chronic liver disease , normal in pregnancy

## Spider Naevi :

- Chronic liver disease , normal in pregnancy

## Sialadenitis Sialadenosis :

- Chronic Alcohol Abuse, Bulimia.

## Aphthous Ulcers (Celiac & IBD).

## Angular Cheilitis (Iron Def.).

## Atrophic Glossitis (Iron Def.)

## Beefy Tongue (Vit.B12 & Folate Def.)

## Enlargement of Supraclavicular LN (Troisier's sign) :

- Gastric + Pancreatic CA.

## Widespread lymphadenopathy + Hepatosplenomegaly :

- Lymphoma

## Fetor Hepaticus :

- Chronic liver disease, liver failure

## Abdominal swelling :

- **Diffuse** : ascites or intestinal obstruction.
- **Localised** : urinary retention, mass or enlarged organ such as liver.

## UMBILICUS :

- **Sunken** : Obesity    **Inverted** : Normal    **Flat** : Ascites    **Everted** : Ascites.
- Umbilical mass may indicate metastatic disease (Sister Mary Joseph's Nodule)

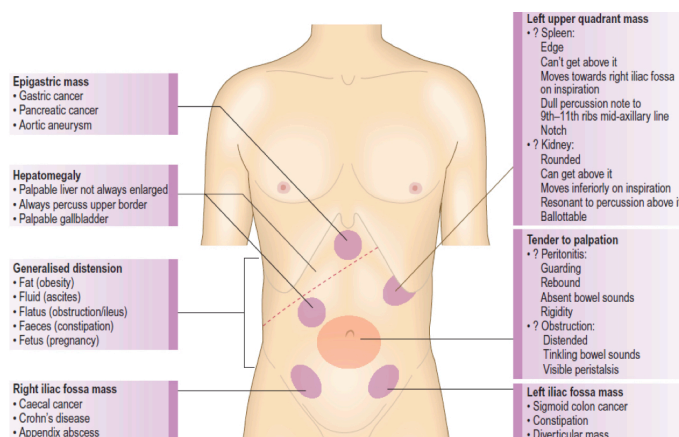
## REBOUND TENDERNESS :

- When rapidly removing your hand after deep palpation, the pain will increase.
- Indicates : Intra-abdominal disease (but not necessary peritonism).

## MURPHY'S SIGN :

- Deep palpation at 9th costal margin during deep inspiration will cease inspiration with tenderness.
- Indicates : Acute Cholecystitis.

## Sites of tenderness :



## Special signs :

6.9 Specific signs in the 'acute abdomen'		
Sign	Disease associations	Examination
Murphy's	Acute cholecystitis: Sensitivity 50–97% Specificity 50–80%	As the patient takes a deep breath in, gently palpate in the right upper quadrant of the abdomen; the acutely inflamed gallbladder contacts the examining fingers, evoking pain with the arrest of inspiration
Rovsing's	Acute appendicitis: Sensitivity 20–70% Specificity 40–96%	Palpation in the left iliac fossa produces pain in the right iliac fossa
Iliopsoas	Retroileal appendicitis, iliopsoas abscess, perinephric abscess	Ask the patient to flex their thigh against the resistance of your hand; a painful response indicates an inflammatory process involving the right psoas muscle
Grey Turner's and Cullen's	Haemorrhagic pancreatitis, aortic rupture and ruptured ectopic pregnancy (see Fig. 6.25)	Bleeding into the falciform ligament; bruising develops around the umbilicus (Cullen) or in the loins (Grey Turner)

## Resonance below 5th ICS :

- Hyperinflated lung
- Interposition of transverse colon between liver & diaphragm (**Chilaiditi's sign**)

## Gallbladder :

### Palpable Distended GB

- Obstruction of cystic duct [Mucocele or Empyema]
- Obstruction of common bile duct [Pancreatic CA]

### Courvoisier's sign (Jaundice + Palpable GB) :

likely Extrahepatic Obstruction [pancreatic CA or, very rarely, GBS].

### tender GB + Impalpable (fibrosis of GB wall) :

Gallstone disease

## Spleen vs. Kidney :

6.12 Differentiating a palpable spleen from the left kidney		
Distinguishing feature	Spleen	Kidney
Mass is smooth and regular in shape	More likely	Polycystic kidneys are bilateral irregular masses
Mass descends in inspiration	Yes, travels superficially and diagonally	Yes, moves deeply and vertically
Ability to feel deep to the mass	Yes	No
Palpable notch on the medial surface	Yes	No
Bilateral masses palpable	No	Sometimes, e.g. polycystic kidneys
Percussion resonant over the mass	No	Sometimes
Mass extends beyond the midline	Sometimes	No (except with horseshoe kidney)

## SAAG [Serum-Ascites Albumin Gradient] :

	SAAG (g/dL)	
	≥ 1.1	< 1.1
<b>Total protein (g/dL)</b>		
< 2.5	Cirrhosis Acute liver failure	Nephrotic syndrome
≥ 2.5	CHF Constrictive pericarditis Budd-Chiari syndrome Veno-occlusive disease	Peritoneal carcinomatosis TB peritonitis Pancreatic ascites Chylous ascites

## AUSCULTATION :

### absent bowel sounds :

- peritonitis, paralytic ileus.

### Bruit :

- Liver (acute alcoholic hepatitis, HCC & AVM) , MCC: transmitted heart murmur
- Vessels.

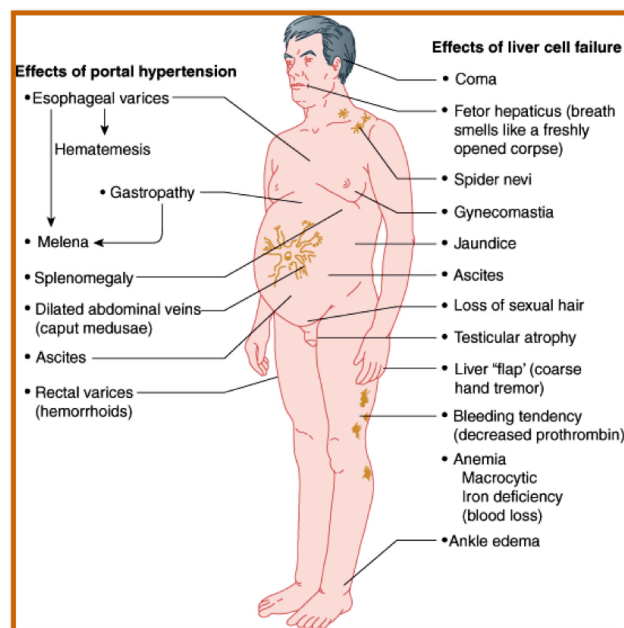
### Friction Rub:

- Liver (perihepatitis) & Spleen (perisplenitis).

# GI diseases physical findings

## Chronic liver disease :

- Leukonychia, Dupuytren's Contracture (Alcohol-related chronic liver disease), Palmar erythema, clubbing
- spider nevi
- Lost of normal hair distribution in males
- Jaundice
- Gynecomastia (males) or Breast atrophy (females)
- Splenomegaly, hepatomegaly (may be small), dilated collateral vessels around umbilicus
- Testicular atrophy
- Legs edema, hair loss
- Skin pigmentation
- Fetor hepaticus
- Ascites
- Bleeding tendency (decreased prothrombin)



## Portal HTN :

- esophageal varices -> hematemesis, melena
- Gastropathy -> melena
- Splenomegaly
- Dilated abdominal veins (caput medusa)
- Ascites
- Rectal varices (hemorrhoids)

## Liver Failure :

- Asterixis.
- Fetor Hepaticus.
- Altered mental state [varying from drowsiness with day/night pattern reversed, through confusion & disorientation, to unresponsive coma].
- Jaundice, Ascites.
- Late Neurological Features [spasticity, extension of arms & legs, & extensor plantar responses].

## Iron deficiency anemia :

- Koilonychia, Aphthous Ulcers, Angular Cheilitis, Atrophic Glossitis

## Celiac :

- clubbing, Aphthous Ulcers

## Inflammatory bowel disease (IBD) :

- Clubbing, Aphthous Ulcers

## Vit. B12 & Folate deficiency :

- Beefy tongue

### Gastric + Pancreatic CA. :

- Enlargement of Supraclavicular LN (Troisier's sign)
- Aortic pulsation

### Liver Cirrhosis :

- clubbing, ascites, jaundice
- Liver enlarged in early cirrhosis but shrunken in advanced cirrhosis

### Felty's Syndrome :



## Felty's Syndrome Components

- Splenomegaly**
- Anemia**
- Neutropenia**
- Thrombocytopenia**
- Arthritis (Rheumatoid)**

Felty syndrome is a rare condition that involves rheumatoid arthritis, decreased white blood cell count, and a swollen spleen.