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# Introduction

Introduction to M2 GI Sequence  
Rebecca W. Van Dyke, MD

Winter 2012



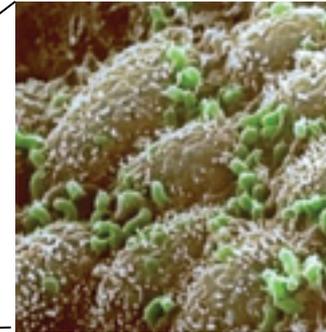
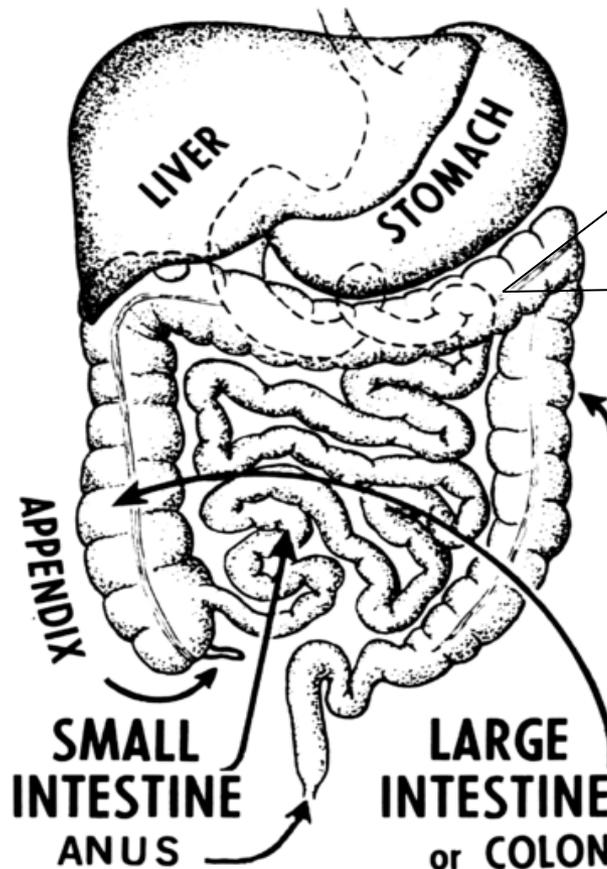
# **Industry Relationship Disclosures Industry Supported Research and Outside Relationships**

- None

# Learning Objectives

- 1. Students will describe tools to evaluate the GI tract.
- 2. Students will view endoscopic pictures and videos (available on line) as a tour of the GI tract.
- 3. Students will describe specialized forms of endoscopy (capsule endoscopy, double-balloon endoscopy)
- 4. Students will describe principles of GI motility from educational video on the subject which they will view on line.

# The GI Tract: Multiple organs and endogenous flora (bacteria)



PD-INEL

# Address to a Haggis

Robert Burns

Fair fa' your honest sonsie face  
Great chieftain o' the pudding race...

The groaning trencher there ye fill  
Your hirdies like a distant hill.....

But mark the Rustic, haggis-fed  
The trembling earth resounds his tread.....

Ye Pow'rs wha mak mankind your care;  
And dish them out their bill o'fare  
Auld Scotland wants nae skinking ware  
That jaups in luggies;  
But, if ye wish her gratefu' prayer,  
Gie her a haggis!

# Course Information

- Course content/MDC
- Syllabus and information about the course
- Web sites for additional materials
- Introduction to Gastroenterology
- Morning question/problem periods

## **M2 GI Sequence Jan 25-Feb 10, 2012**

Your syllabus has the complete course schedule and it is also posted on-line.

Please check for your small group and pathology lab assignments as well.

We will work through modules:

1. Stomach/esophagus: esophagitis, peptic ulcer disease
2. Motility disorders of the tubular GI tract
3. Small intestine/colon: diarrhea, inflammatory bowel disease, cancer
4. Abdominal pain
5. Liver physiology and disease
6. GI cancers: pancreatic, colorectal
7. Pancreatic disease
8. GI bleeding and miscellaneous topics
9. Nutrition
10. Introduction to ENT (otolaryngology)

# Web-Based Information

- PowerPoint presentations of lectures are available on-line as are streaming videos.
- Copy of GI Pathology lab syllabus will also be put on on-line
- Copy of Pathology Slide Guide is found at:
- <http://www.med.umich.edu/lrc/students/m2/gastrointestinal/index.html>

# GAS608 Final Exam

(3 hour course exam and 1 hour pathology exam)

Online access Friday Feb 10, 5:00 p.m. – Sign-on deadline  
for both exams: Sunday Feb 12, 10:00 p.m..

Queries due by during the week after the exam. Exact times  
will be posted.

# Tools for Evaluating the GI Tract

## Capsule endoscopy



 PD-SELF Euchiasmus, Wikimedia Commons

## Endoscopy

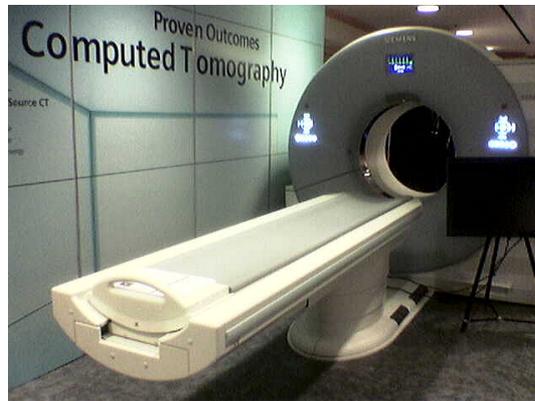


- Biopsy
- Endoscope

## Radiology



 jckack, Flickr



 brainsik, Flickr

# Dr. Basil Hirschowitz and an early fiberoptic endoscope at the University of Michigan

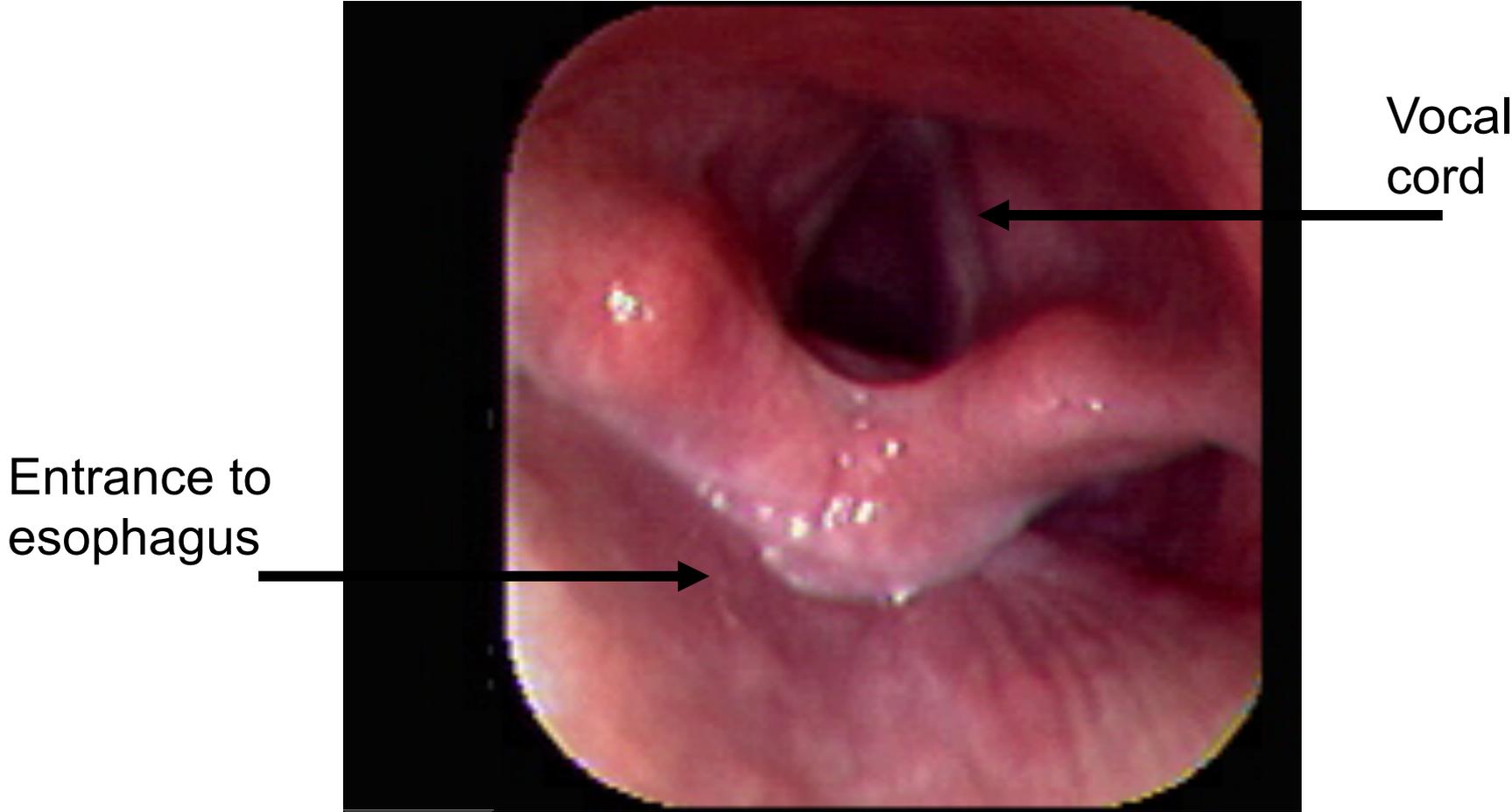


Hirschowitz using an early gastroscope

# **Tour of the Lumen of the Tubular Gastrointestinal Tract: Structures Within Reach of the Endoscope**

A Lumen with a View

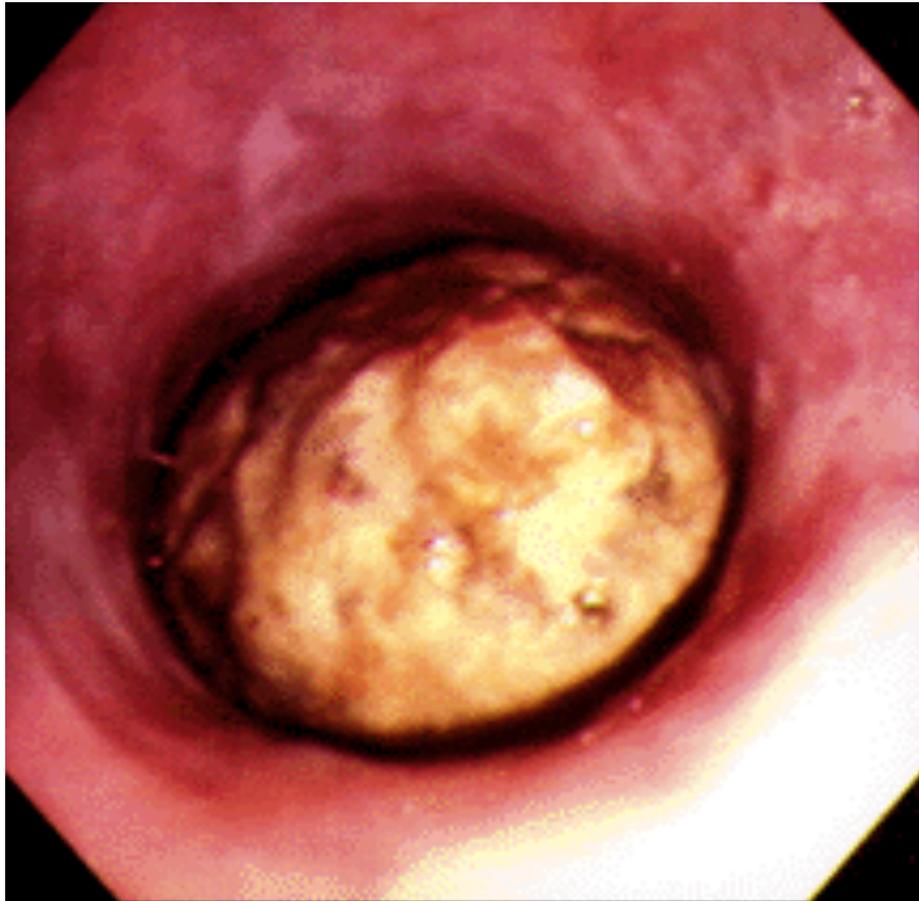
# Normal Vocal Cords



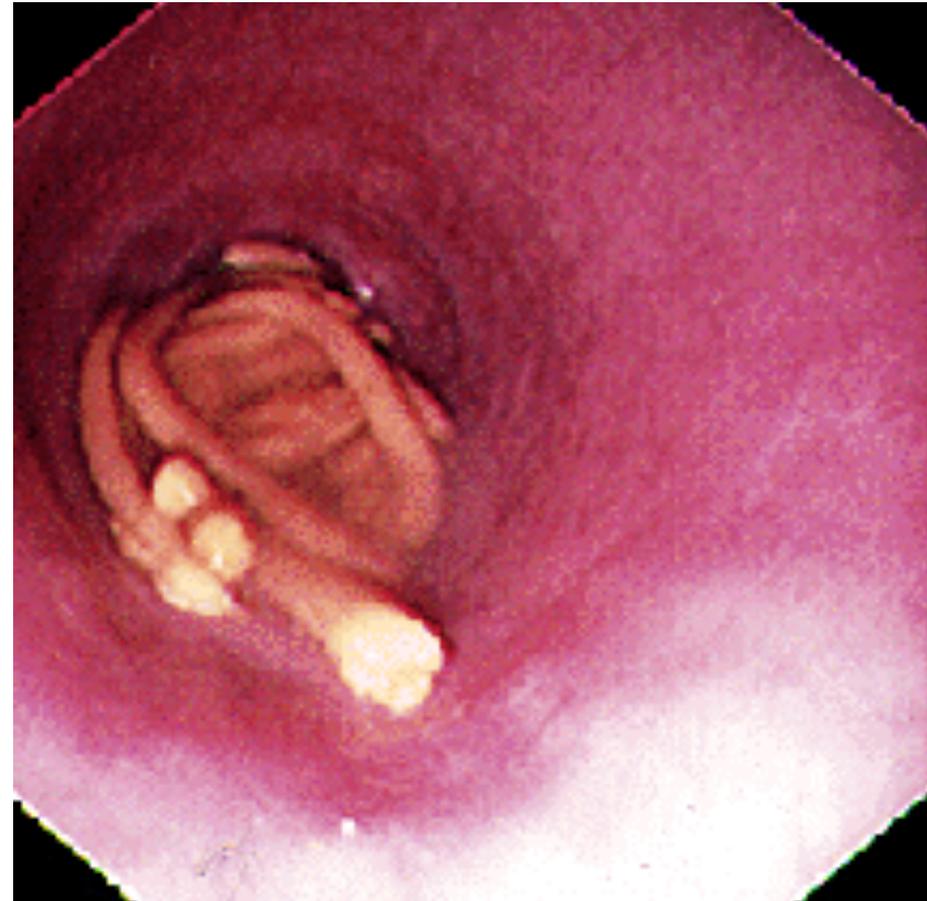
# Normal Esophagus



# A Funny Thing Happened on the Way to the Stomach



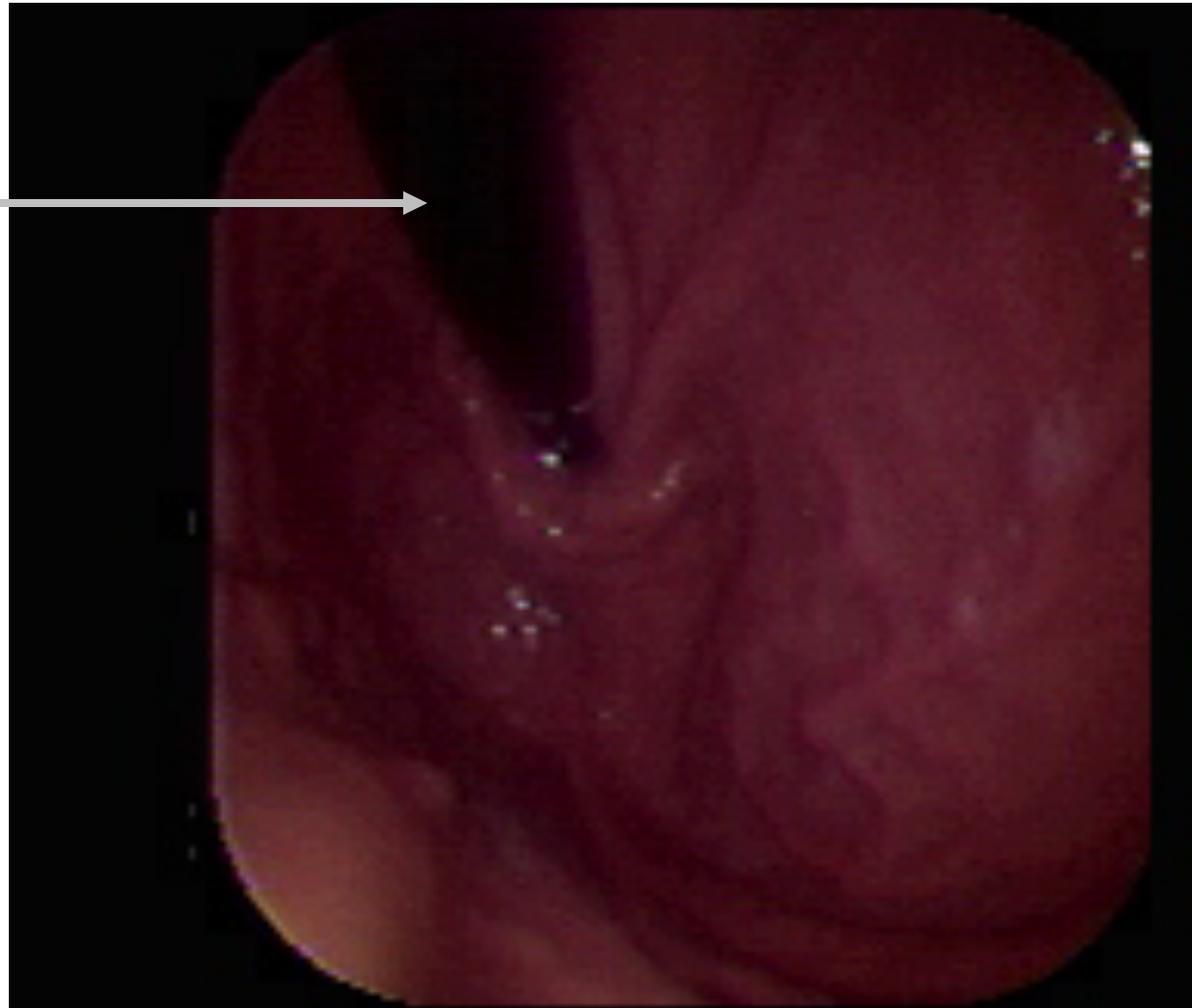
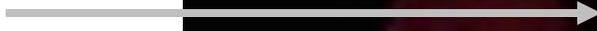
**Meatball is stuck**



**Spaghetti in Esophagus**

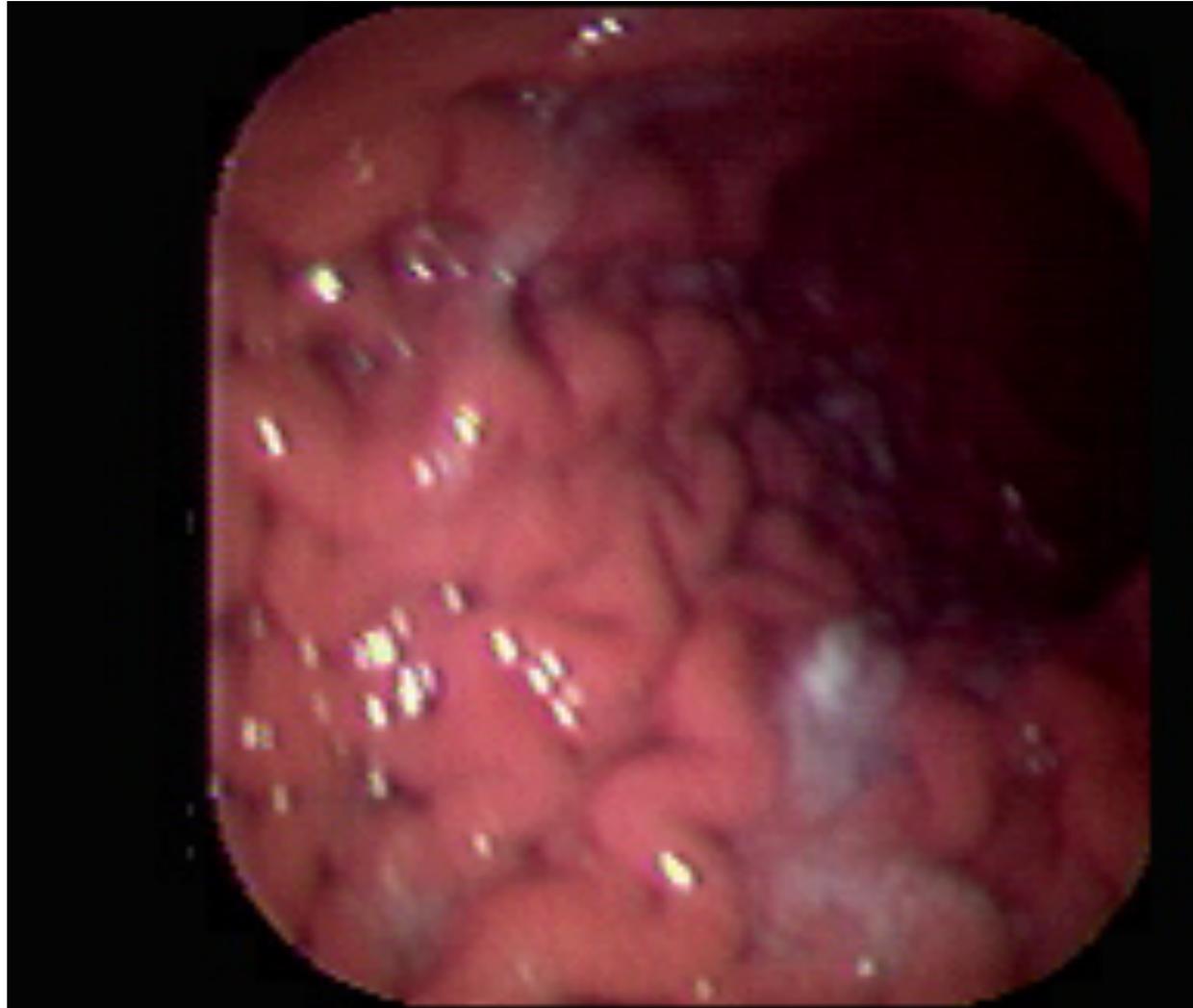
# Retroflex View of Gastro-esophageal Junction from inside the stomach

Endoscope

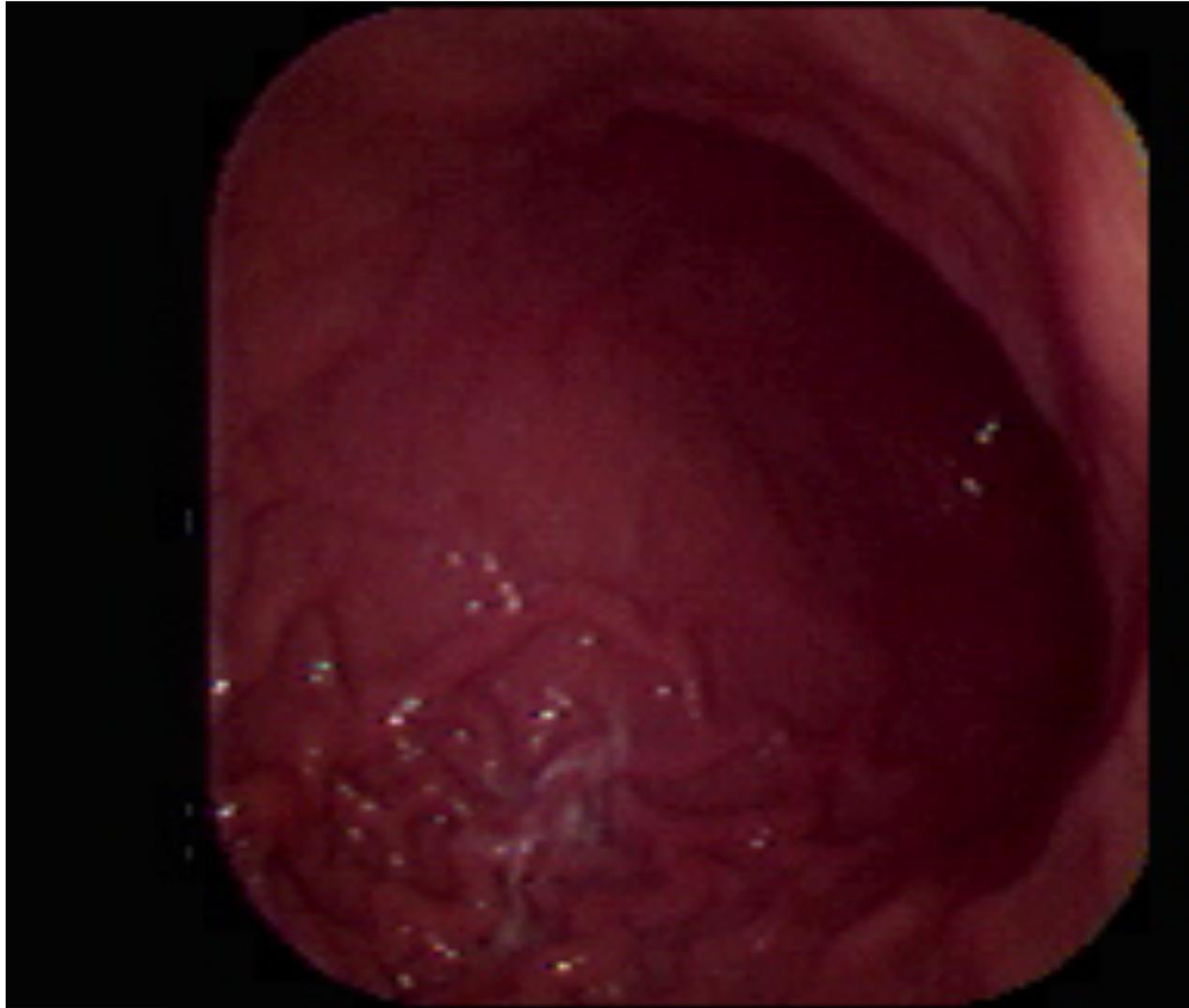


# Normal Stomach

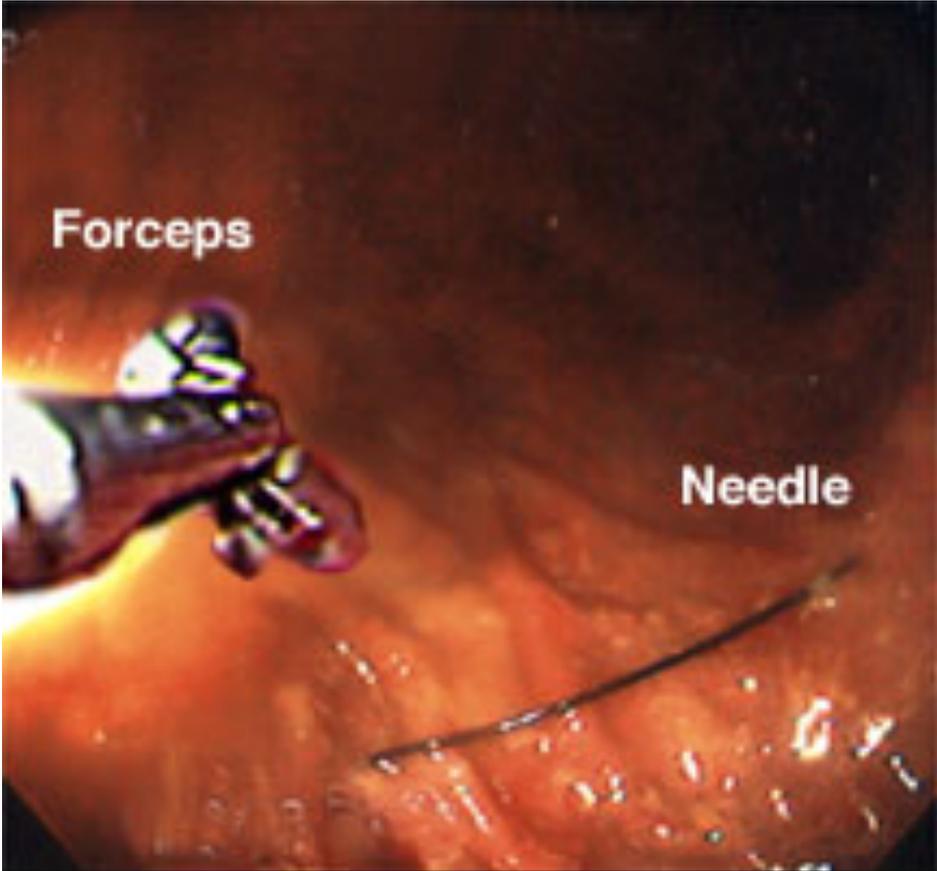
Large rugal folds of proximal stomach  
(fundus)



# Normal Distal Stomach/Antrum



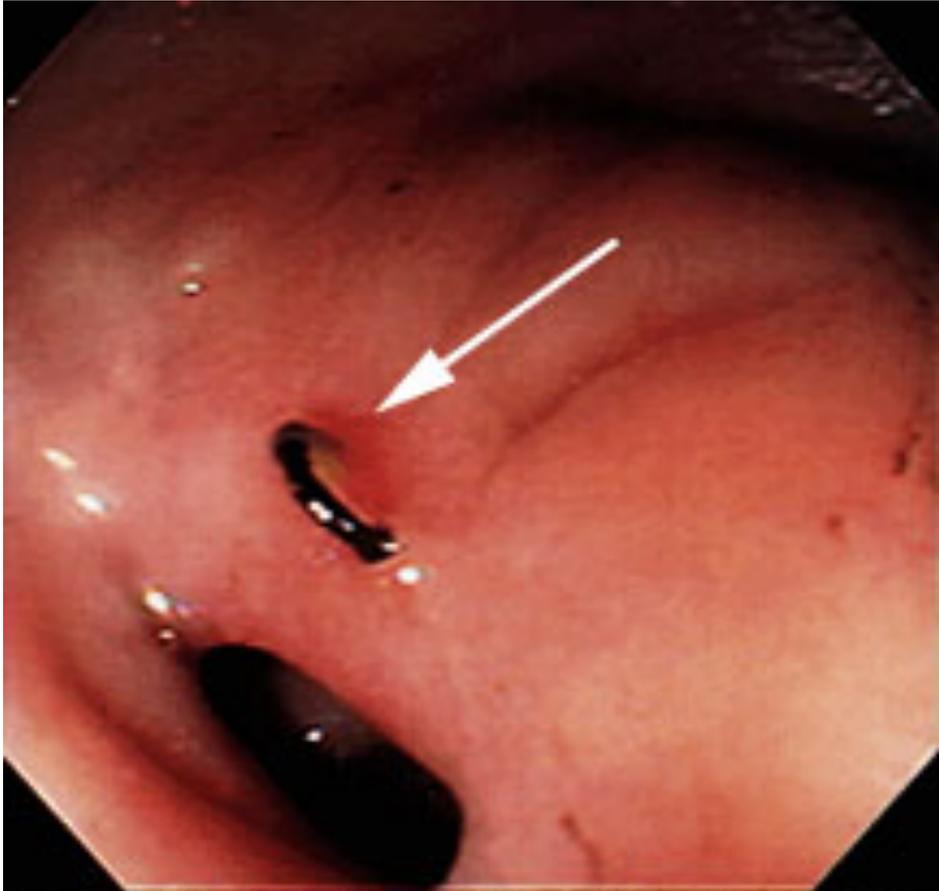
# Strange Encounters of the Endoscopic Kind



Forceps

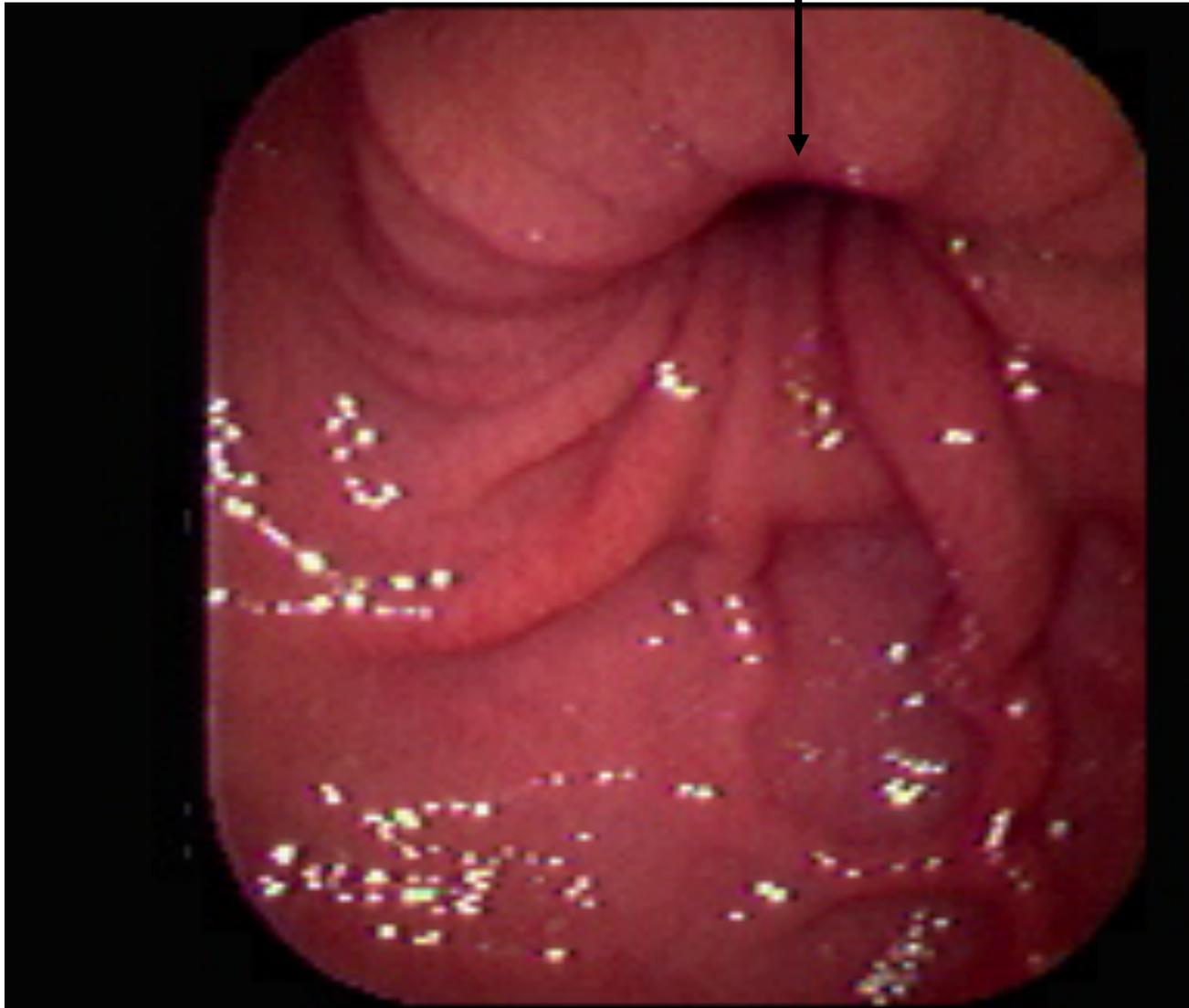
Needle

**Sewing Needle in Stomach**



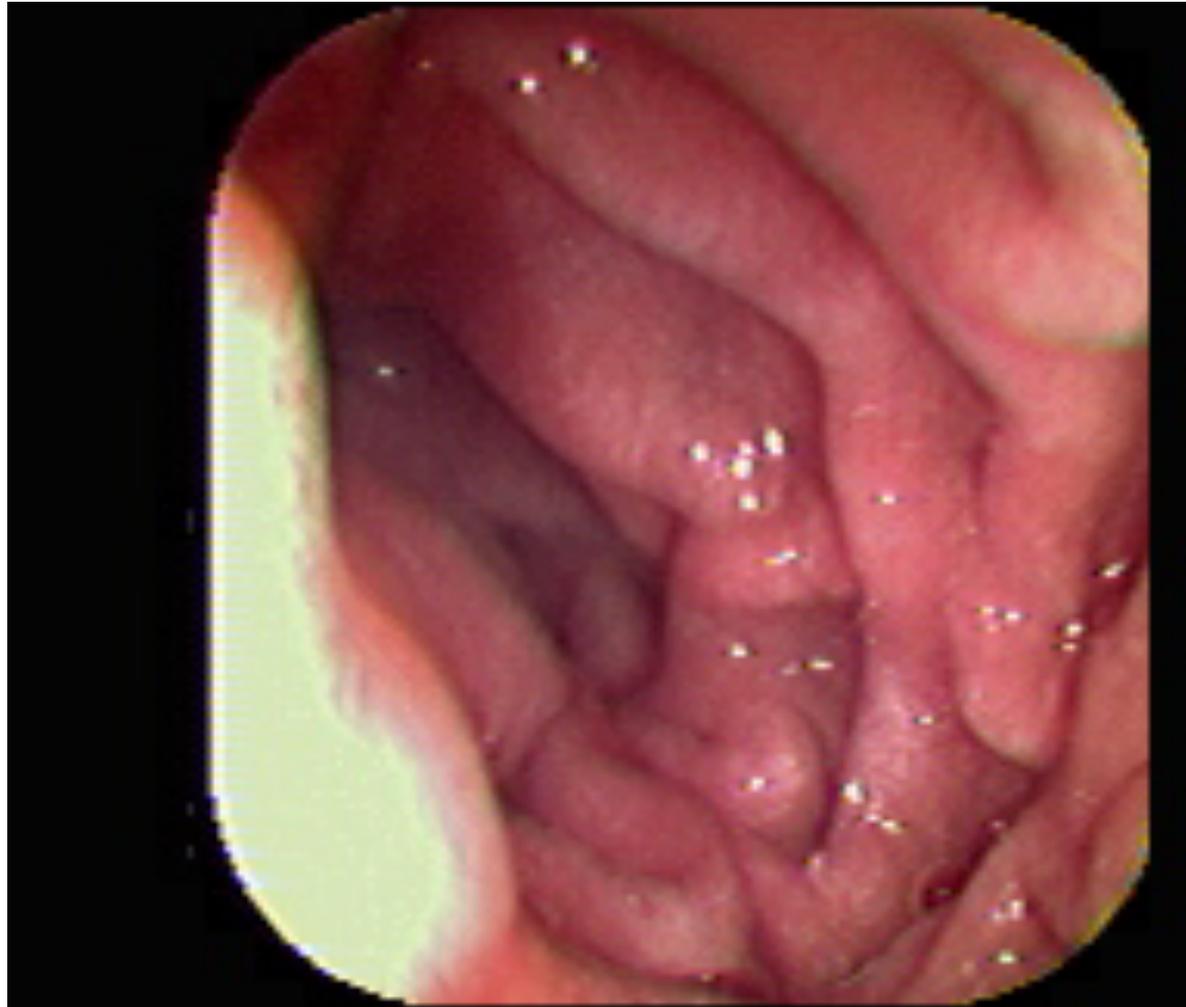
**Staple from past surgery**

# Normal Antrum (foreground) and Pylorus

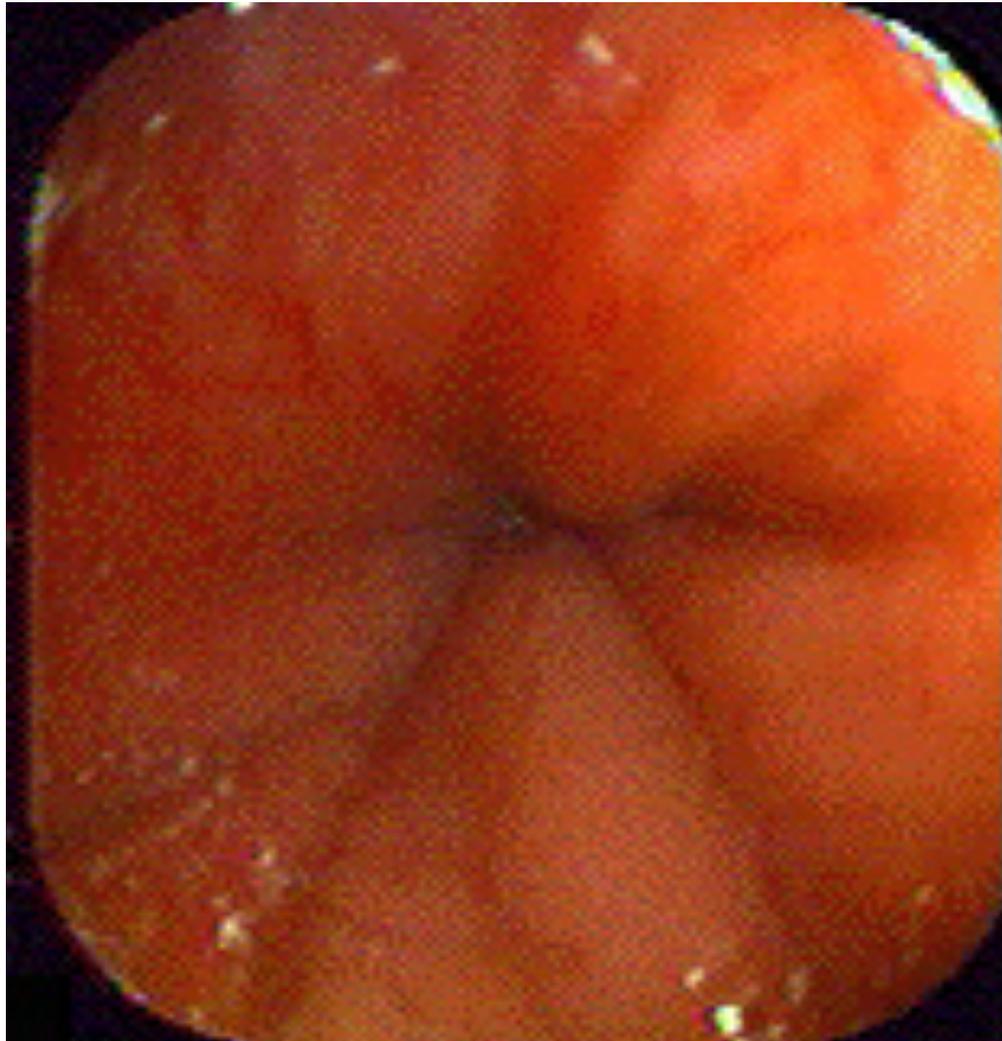


# Normal Duodenum

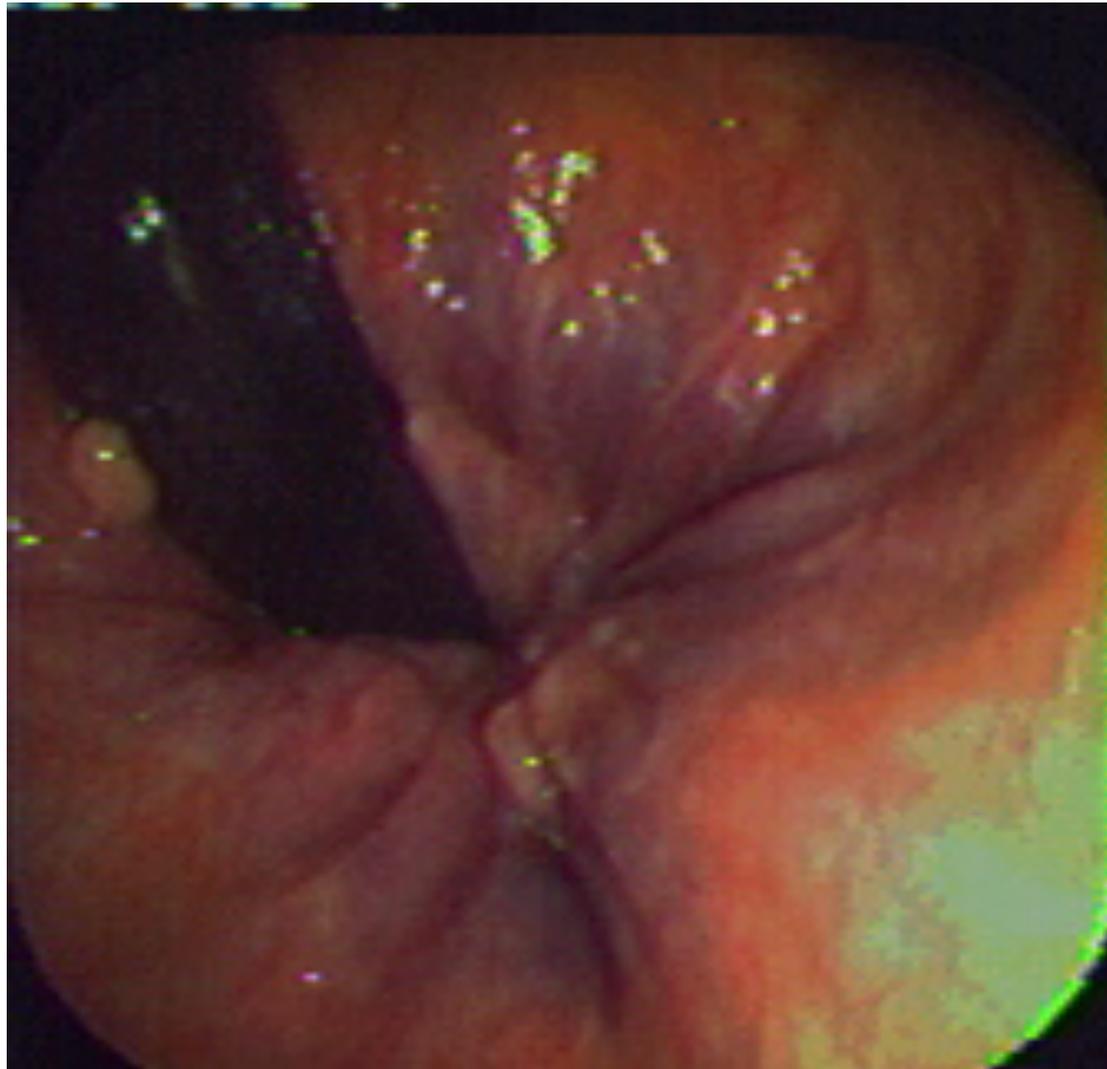
Not distended so valvulae conniventes appear thickened



# External View of Normal Anus

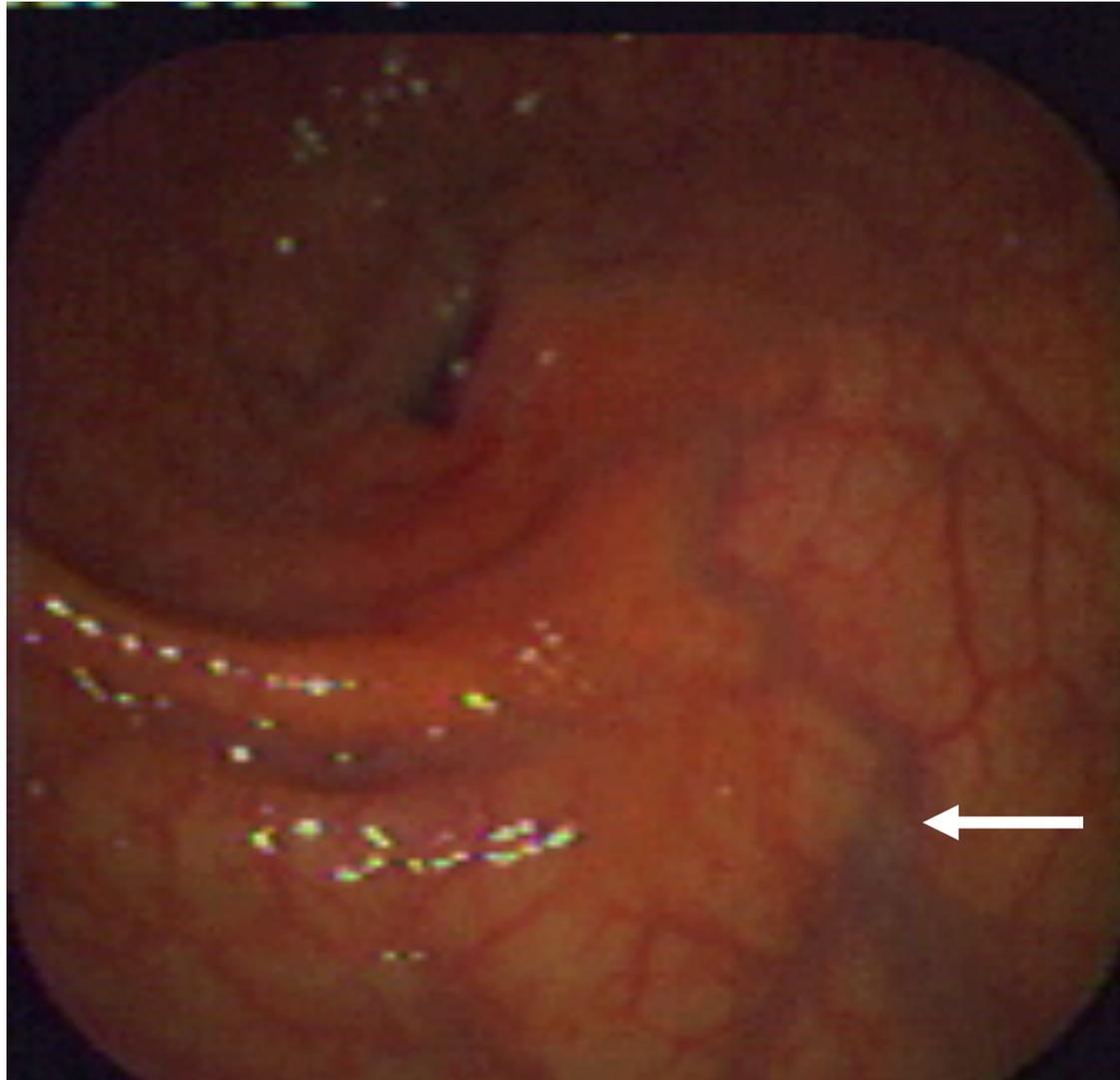


# Retroflex View of Anus/Anal Sphincter from inside the colon

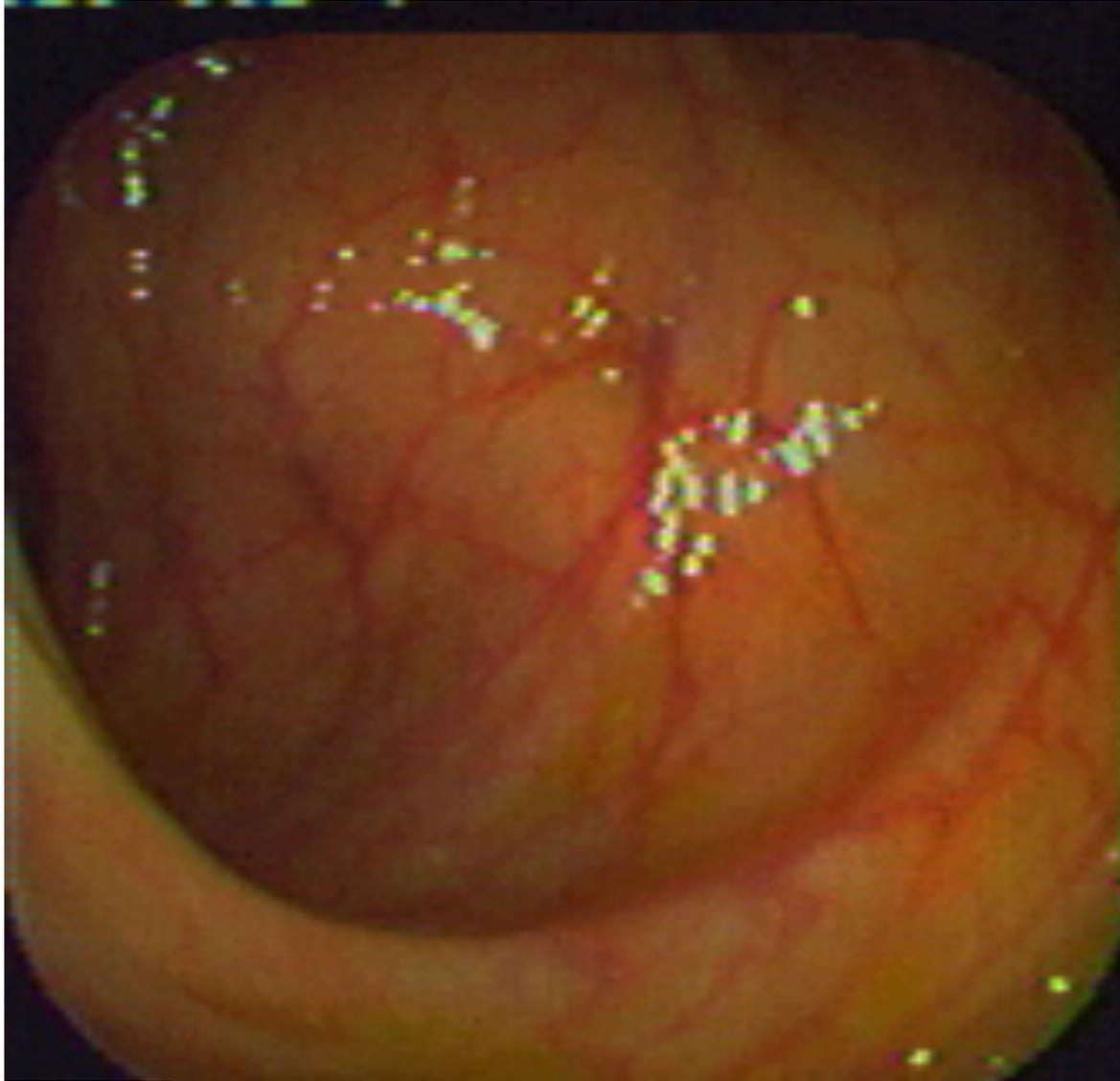


# Normal Rectum

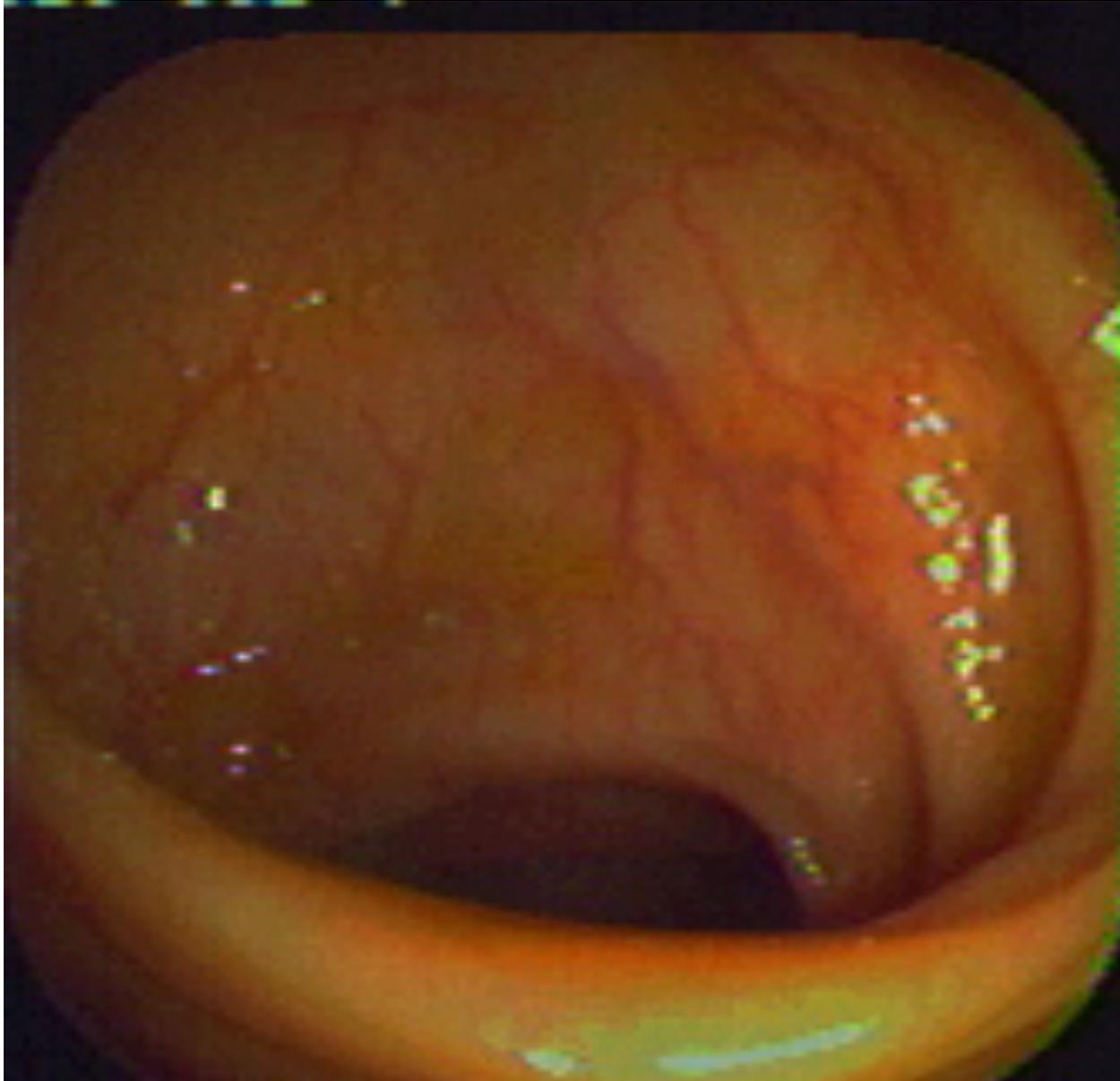
prominent vasculature



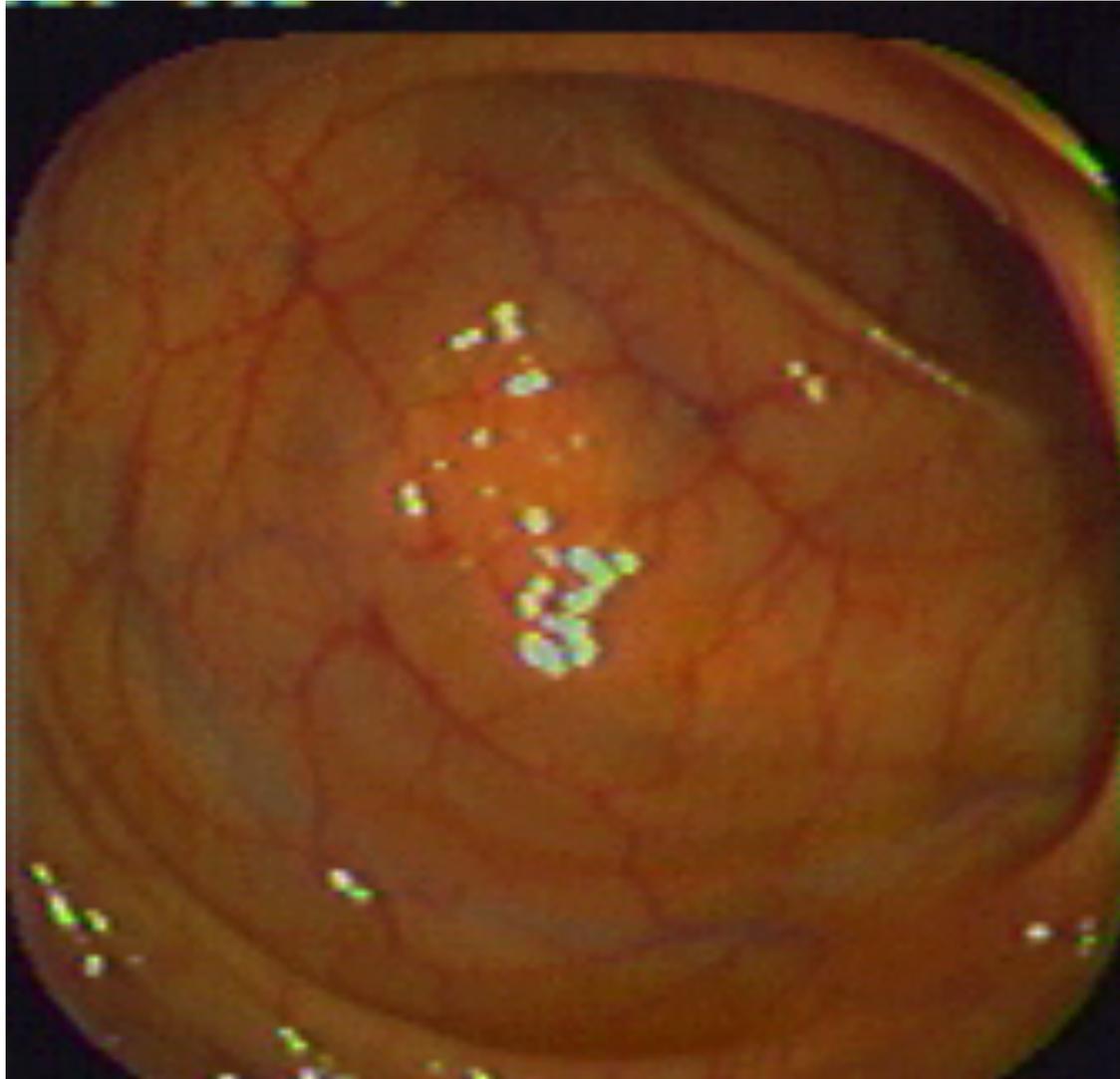
# Sigmoid Colon

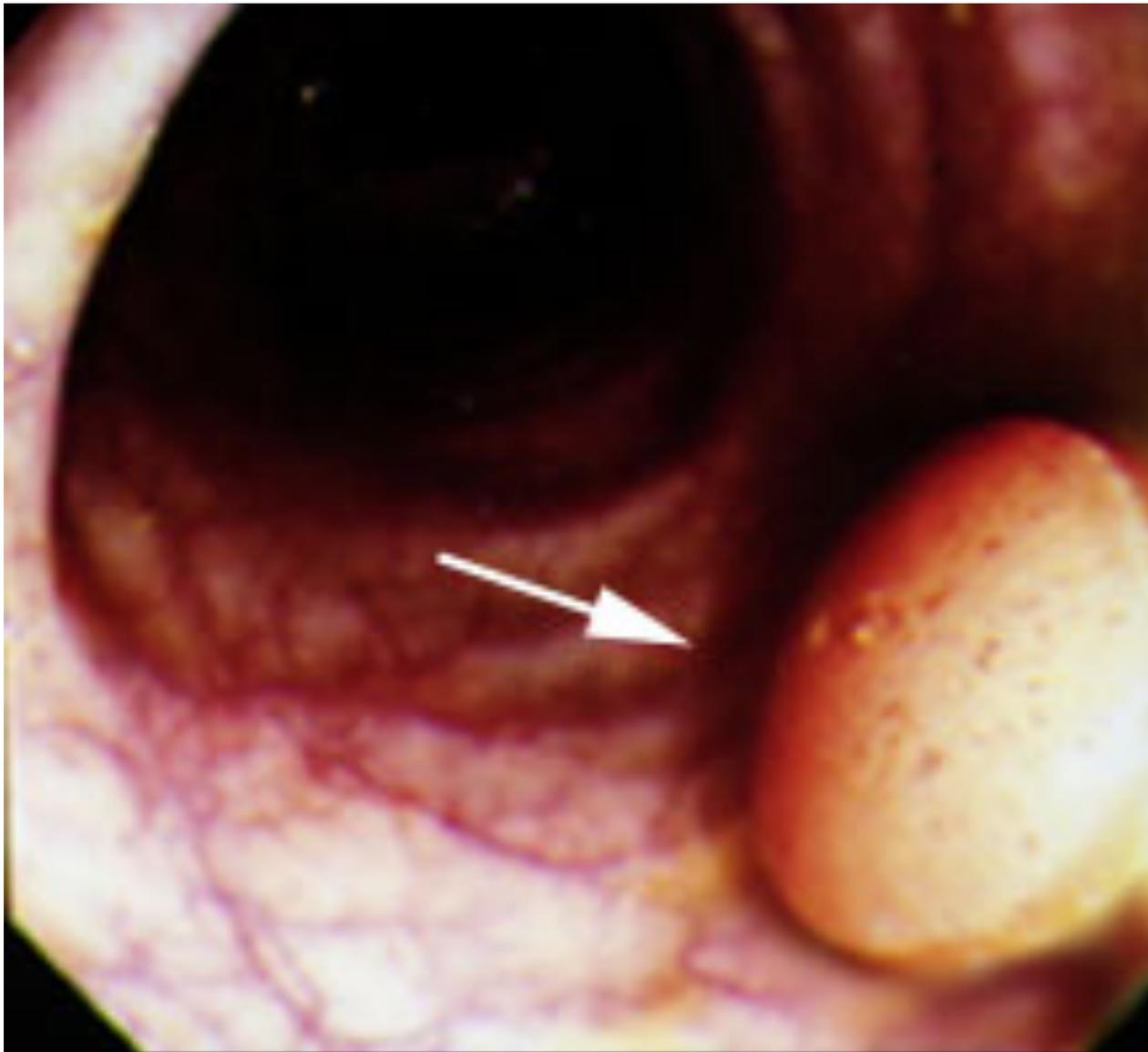


# Descending Colon (left side)



# Splenic Flexure of Colon

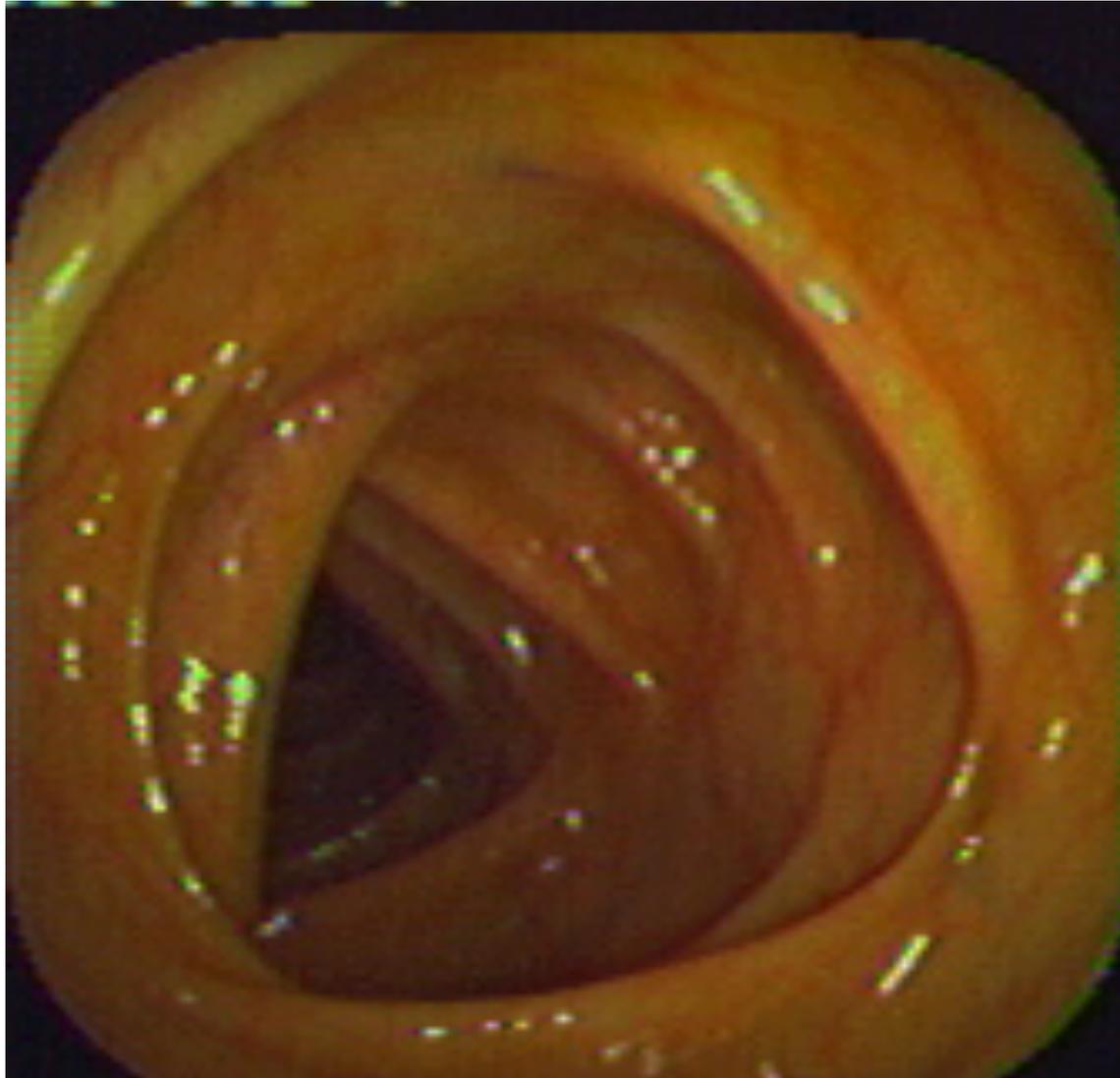




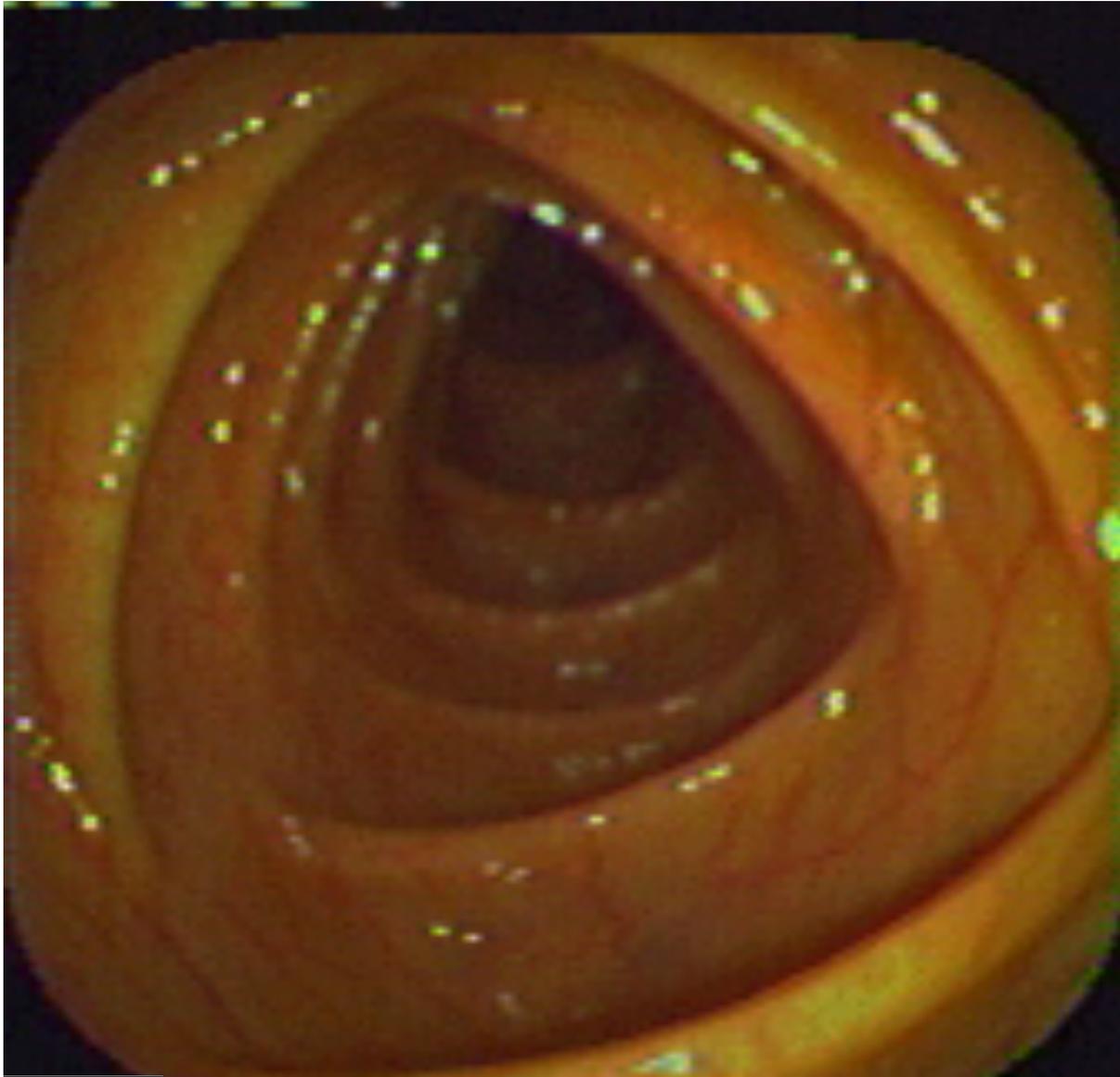
**Pill in the Colon**

# Transverse Colon

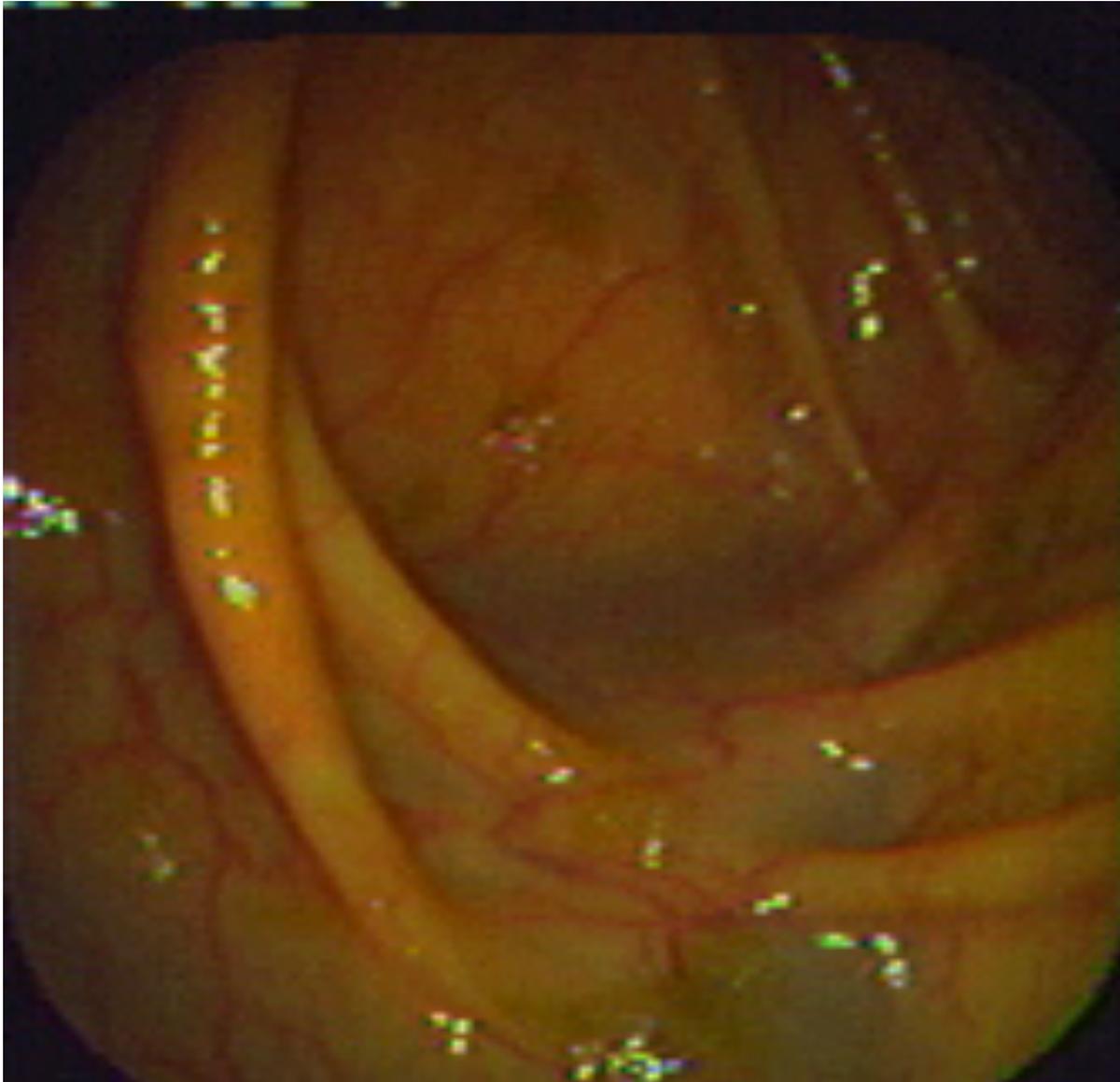
characteristic triangular folds



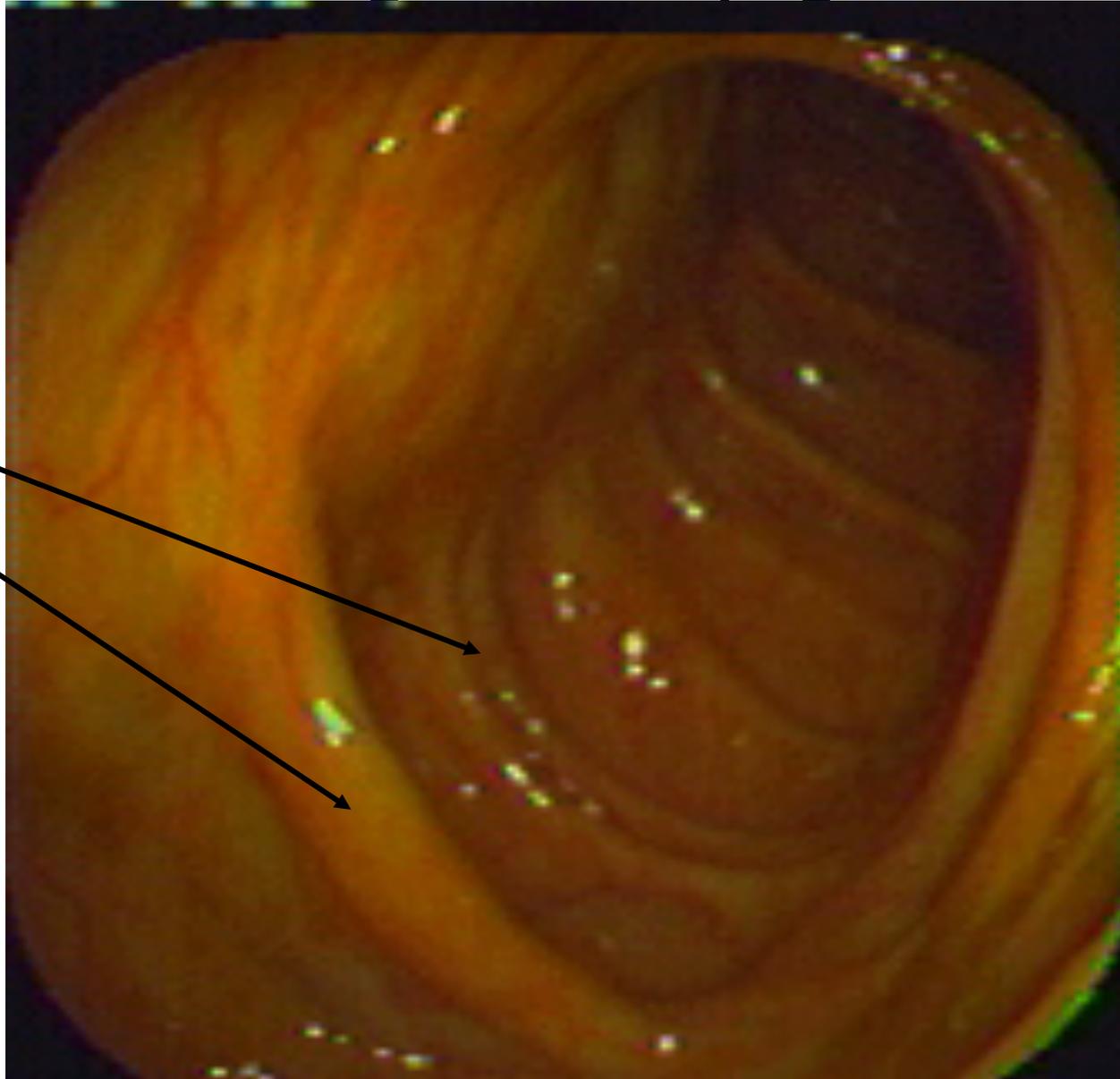
# Transverse Colon



# Hepatic Flexure of Colon



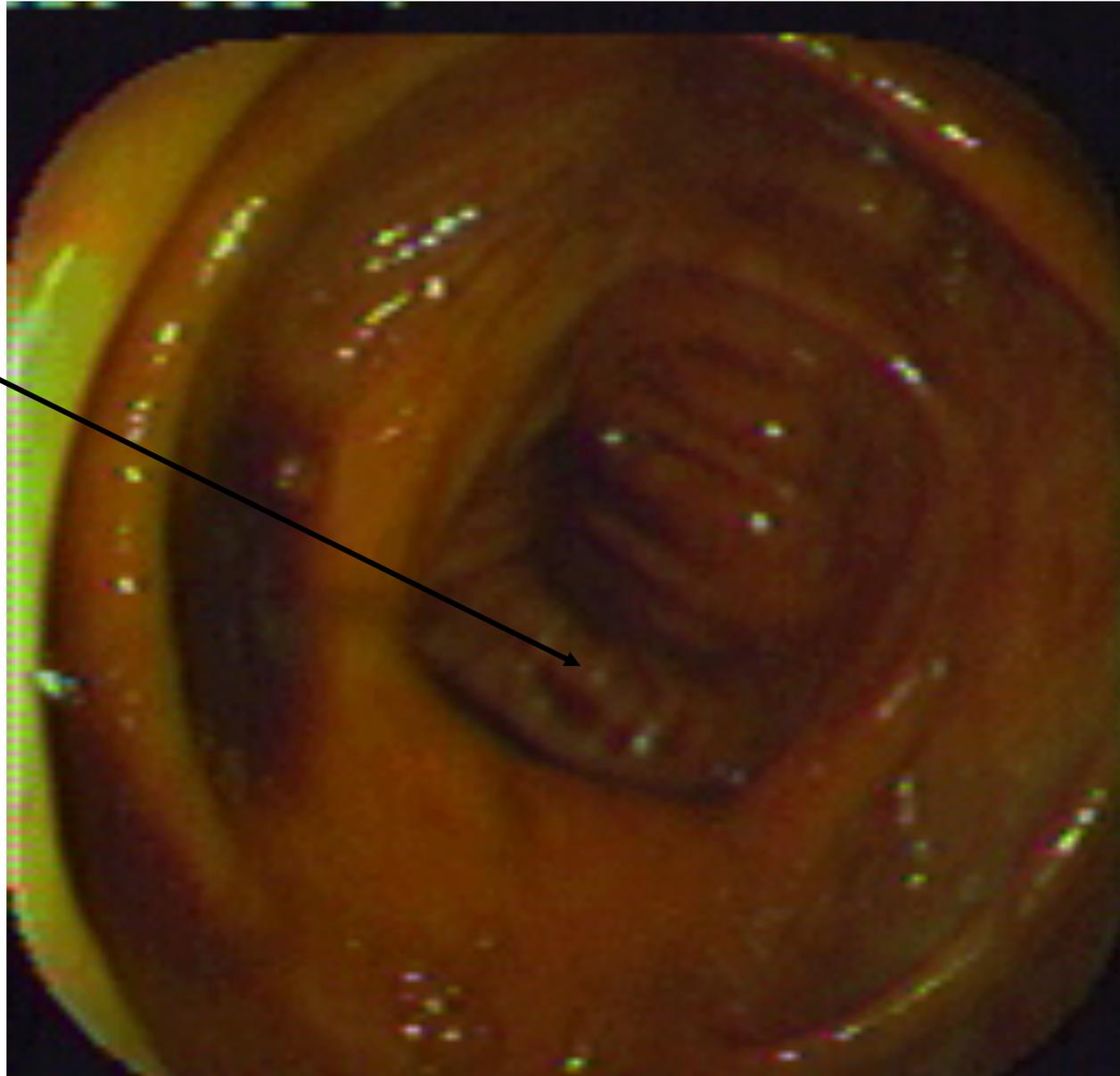
# Ascending Colon (right side)



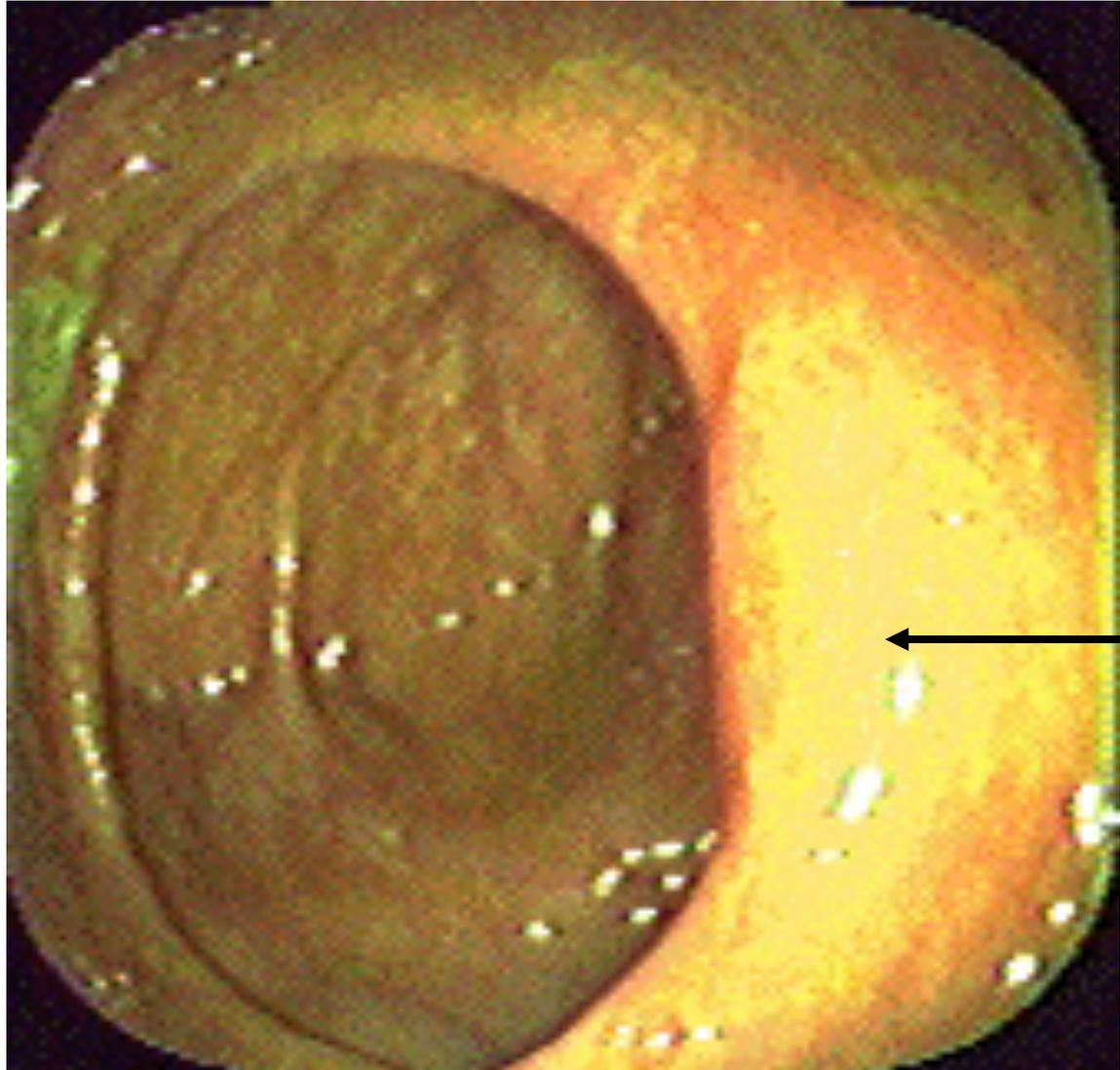
Haustral  
Folds

# Cecum

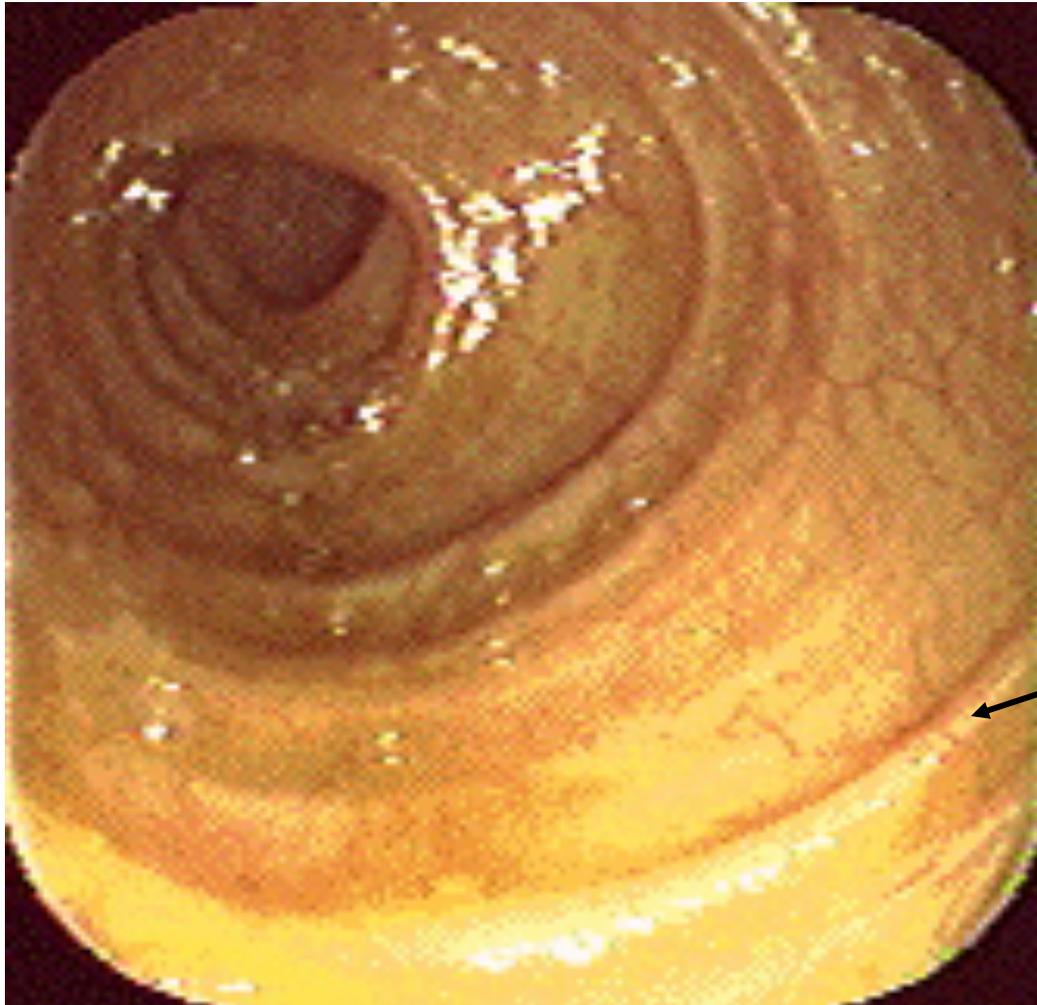
Ileocecal  
Valve



# Close-up of Ileocecal Valve in the Cecum



# Ileum as viewed after passing through the ileocecal valve from the colon

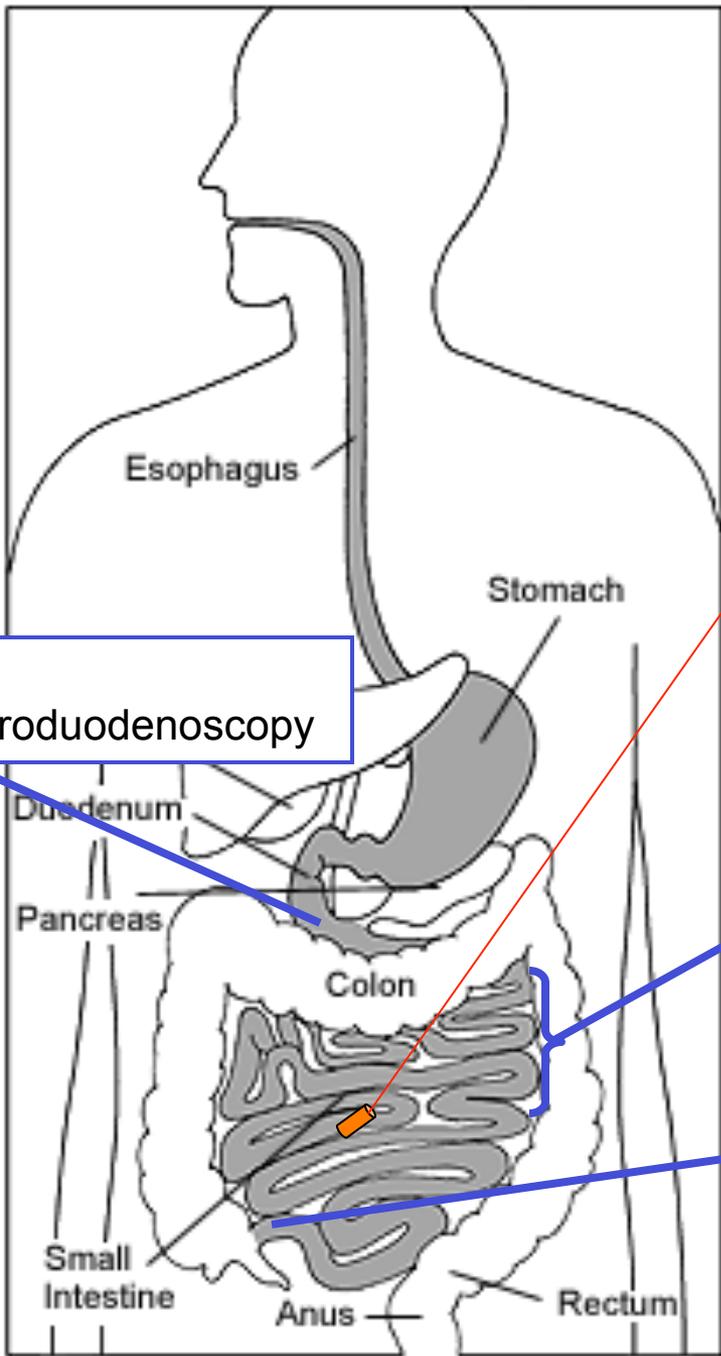


Valvulae  
conniventes



# Endoscopy

- View from mouth to mid-duodenum
  - Upper endoscopy
  - EGD = esophagogastroduodenoscopy
- View from anus to cecum/terminal ileum
  - Lower endoscopy
  - Colonoscopy
- What does this leave?
  - Small bowel
  - Capsule endoscopy



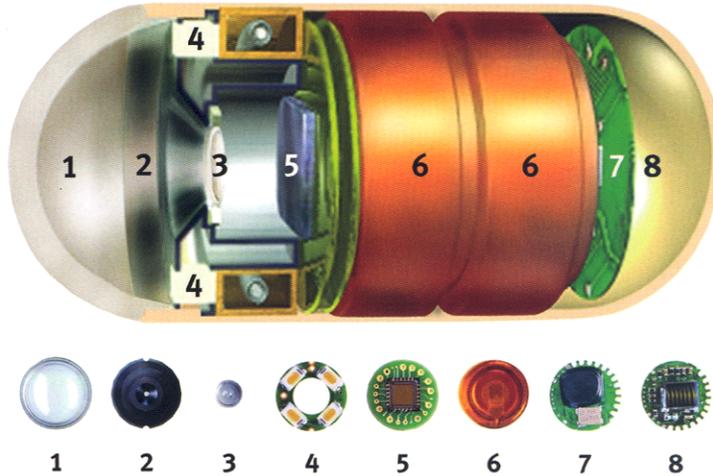
Capsule can be used to easily visualize rest of the small intestine.

Extent of esophagogastroduodenoscopy

Extent of push endoscopy (80-120 cm past ligament of Trietz). Uncomfortable and time-consuming.

Extent of colonoscopy

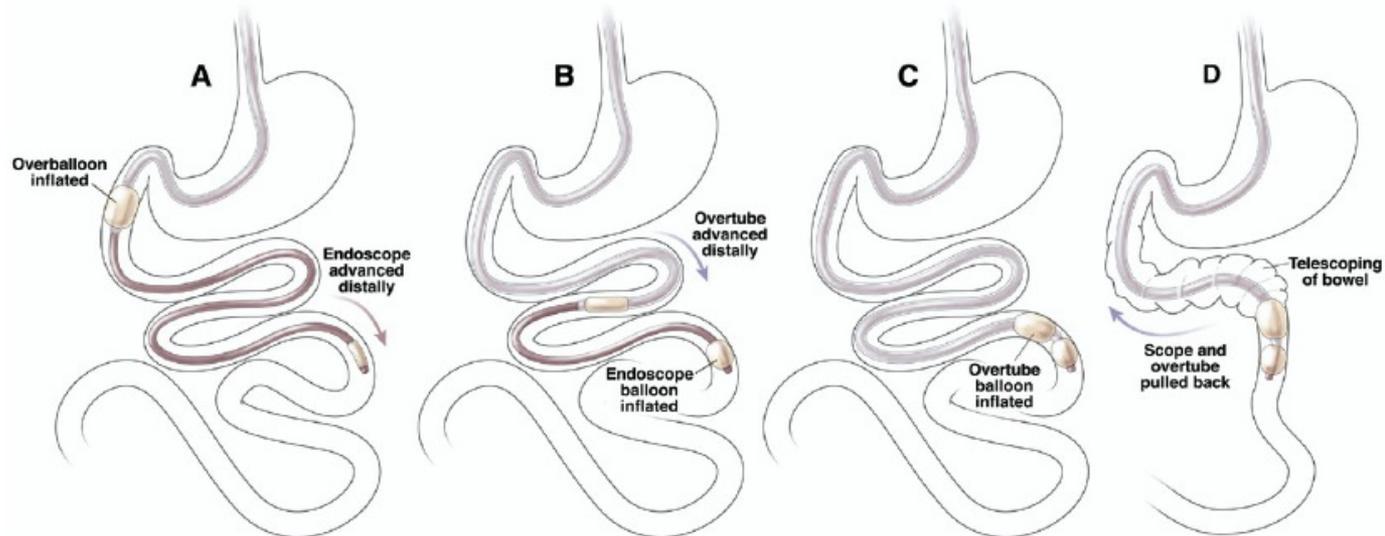
# Capsule endoscopy



## Inside the capsule:

1. Optical dome
2. Lens holder
3. Lens
4. Illuminating LEDs (Light Emitting Diodes)
5. CMOS (Complementary Metal Oxide Semiconductor) imager
6. Battery
7. ASIC (Application Specific Integrated Circuit) transmitter
8. Antenna

# Double Balloon Endoscopy



**Figure 2.** Double balloon enteroscopy. The drawings above show the technique of "push and pull enteroscopy" using the double-balloon endoscope with overtube to facilitate examination of the SB.

# Capsule Views normal small bowel



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Lymphoid hyperplasia

# Capsule Views Diseases



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Ulcers from Crohn's disease or non-steroidal anti-inflammatory  
Drugs (NSAIDs)

# Capsule Views Disease



© PD-INEL

Bleeding



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Arteriovenous  
Malformation  
(AVM)



© PD-INEL

Stricture  
(NSAIDs)

# Further images and endoscopic videos of GI/Liver diseases

- [daveproject.org/](http://daveproject.org/)
- This is a free website established and updated by gastroenterologists and sponsored by the American Society of Gastrointestinal Endoscopists and one of the endoscopy equipment manufacturers
- Feel free to wander.....

# Videos

- Animations of upper and lower endoscopy
- Examples of normal endoscopy – these will be posted on CTools
- GI motility video – physiology and pathophysiology. This is about 30 minutes in regular speed. It is on CTools and I suggest you watch it at the usual 1.5-2x speed.

# Additional Source Information

for more information see: <http://open.umich.edu/wiki/CitationPolicy>

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