Management of upper abdominal pain

Gastric cause

- burning epigastric pain or cramps between meal or heartburn,
- generally relieved by antacids;
- acid regurgitation may present (often postural: while sitting forward or lying down)
- recurrent episodes often accompanied by nausea and even vomiting.

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- Stop NSAID, alcohol and tobacco use.
- ALOH PO: 1 to 2 tablets 3 times daily (20min – 1hr after meals) or 1 tablet during painful attacks.
- Omeprazole PO (if ALOH is insufficient):
  - 20 mg once daily in the morning for 3-7 days
  - can be increased to 40 mg once daily in severe or recurrent cases

➢ H-pylori eradication in frequent recurrences unrelated to NSAID use

Hepatitis

- Nausea, vomiting, LOA
- Rt upper quadrant pain
- Jaundice

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Explore the underlying cause

- Viral infection
- Excessive use of drugs or alcohol

➢ See details in MSF guideline

Cholecystitis

- Nausea, Vomiting
- Belly pain worsening in deep breaths
- Possible aches in the back or right shoulder blade
- positive Murphy's sign(stopping inhalation due to pain when pressing the right upper quadrant_subcostal area during deep inspiration)

➢ See details in MSF guideline

H-pylori eradication

➢ omeprazole PO 20 mg 2 times daily + clarithromycin PO 500 mg 2 times daily + amoxicillin PO 1 g 2 times daily

➢ In penicillin allergy, use metronidazole PO 500 mg 2 times daily instead of amoxicillin