

Gastrointestinal Disorders / Abdominal Pain

Gastrointestinal disorders and abdominal (Abdo) pain which are **not** associated with trauma, are often a result of the following: **contaminated water or food (resulting in diarrhoea), constipation, kidney stones or appendicitis.**

1. Diarrhoea

Recognition:

- onset of effect can range from a few minutes to several hours
- spasmodic abdominal pain and cramps
- watery bowel motions
- nausea & vomiting

Management:

1. Ensure adequate hydration with water or other commercially available re-hydration solutions such as **Staminade®** or **Gastrolyte®**, ensuring that they are prepared only as per instructions on label.
Other substitutes such as clear soups or soft drinks can be diluted to half their consistency. Alternatively, add 4 teaspoons of sugar and ¼ teaspoon of salt to 1 litre of water.
2. Aim to replace as much fluid as has been lost through vomiting and Diarrhoea and give it in frequent small amounts because large amounts usually will not be tolerated. **ALSO** administer an additional 2 litres of fluid over a 24 hour period.
3. Arrange medical evacuation if symptoms continue for longer than 24 hrs or if casualty becomes unconscious or deteriorates.

Warning: Fluid replacement must be maintained even if the casualty continues to vomit.

2. Constipation

In order to overcome this problem an increase in fluids and high fibre intake needs to occur. If in considerable pain and fluids and high fibre have not improved the condition, seek medical advice.

3. Food poisoning

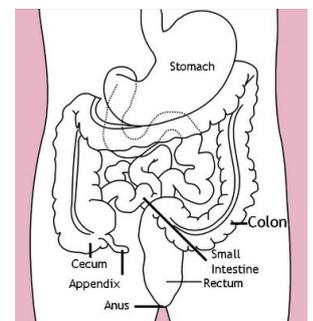
Is usually caused by either poor personal hygiene or food preparation e.g. food washed in contaminated water or poorly stored, or a combination of both. Therefore always wash your hands before preparing food and that water used in food preparation is clean. If uncertain, this can be done by either boiling it for 10 minutes or by using chemical tablets e.g. 'Puritabs' ®.

4. Appendicitis

This condition develops when a small attachment to the large intestine becomes inflamed and infected, becoming extremely dangerous if it ruptures.

Recognition:

- Pain, usually commences in the middle of the abdomen later moving to the lower right side
- Often develops 'rebound tenderness' (pain only after the lower right abdomen area has been gently, but firmly pressed using 2 – 3 fingers, not during)
- Pain is often steady, but can become spasmodic
- Nausea and/or vomiting
- Slight temperature
- Pain can become aggravated when walking or standing up



Warning: When an Appendix ruptures, often there will be no pain in the initial stages. However after a few hours the casualty will usually develop extreme pain across the whole abdominal area which will become rigid and tender. URGENT evacuation is required.

Management:

1. Give nothing orally as patient may require surgery
2. Rest patient in a position of most comfort (usually lying down)
3. Arrange urgent medical evacuation
4. If unable to evacuate and after 4 – 6 hours have elapsed, give small amounts of water

5. Kidney Stones

Small stones can develop within kidneys and can lodge within the tube between the kidney and bladder. Occurs predominately in men.

Recognition:

- Extreme pain (sharp/stabbing) which can be spasmodic, usually develops in the lower back and can radiate to the groin
- Nausea and/or vomiting
- Cool, pale, sweaty skin
- Restlessness and agitation

Management:

In order to assist the flushing of the stone into the bladder, encourage the casualty to drink large volumes of water. If the pain DOES NOT resolve arrange urgent evacuation.



Kidney stones vary in size and appearance. They can be produced by ingesting too much vitamin D, too high protein diet, regularly not having enough water to drink and by some diseases.

If they get too big to pass out to the bladder then they need to be removed surgically.

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