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Gastritis is a common yet often misunderstood condition that affects the stomach lining. It can cause significant discomfort and, if left untreated, may lead to more severe health issues. Understanding the causes, symptoms, and treatments for gastritis is essential for effective management and relief. What is Gastritis? Gastritis refers to the inflammation of the stomach lining, which can occur suddenly (acute gastritis) or gradually (chronic gastritis). Various factors, including infections, prolonged use of certain medications, and lifestyle choices, can cause the condition. Get a second opinion from trusted experts and makeconfronted, informed decisions. Get Second Opinion Causes of Gastritis Understanding the underlying causes of gastritis can help in its prevention and treatment. Several factors can contribute to the development of gastritis, including: Helicobacter pylori Infection Helicobacter pylori (H. pylori) is a type of bacteria that infects the stomach lining. It is one of the most common causes of chronic gastritis and can lead to peptic ulcers and even stomach cancer if left untreated. The bacteria are usually transmitted through contaminated food or water. Prolonged Use of NSAIDs Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen and aspirin, can irritate the stomach lining, leading to gastritis. Long-term or excessive use of these medications increases the risk of developing gastritis. Alcohol and Tobacco Use Excessive alcohol consumption can erode the stomach lining, causing inflammation and irritation. Similarly, smoking tobacco can interfere with the protective mechanisms of the stomach, making it more susceptible to gastritis. Autoimmune Disorders In some cases, the body's immune system mistakenly attacks the stomach lining, leading to autoimmune gastritis. This form of gastritis is often associated with other autoimmune disorders, such as Hashimoto's thyroiditis and type 1 diabetes. Stress and Lifestyle Factors Chronic stress and an unhealthy lifestyle can also contribute to the development of gastritis. Stress increases the production of stomach acid, which can irritate the stomach lining. Additionally, poor dietary choices, such as consuming spicy or fatty foods, can exacerbate the condition. Symptoms of Gastritis The symptoms of gastritis can vary depending on the severity and underlying cause of the condition. Common symptoms include: Abdominal Pain: A burning or gnawing pain in the upper abdomen is a hallmark symptom of gastritis. The pain may be worse after eating or on an empty stomach. Nausea and Vomiting: Gastritis can cause feelings of nausea and may lead to vomiting. In severe cases, vomiting blood or coffee-ground-like material may occur, indicating a bleeding ulcer. Bloating and Indigestion: Many individuals with gastritis experience bloating and a feeling of fullness after eating small amounts of food. Loss of Appetite: The discomfort and pain associated with gastritis can lead to a decreased desire to eat, resulting in weight loss. Heartburn and Belching: Frequent hiccups and belching are common symptoms of gastritis, caused by irritation of the stomach lining. Diagnosing gastritis involves a combination of medical history, physical examination, and diagnostic tests. Your healthcare provider may recommend the following tests: Endoscopy An endoscopy involves inserting a thin, flexible tube with a camera into the stomach to visually inspect the lining. This procedure allows for the detection of inflammation, ulcers, and other abnormalities. Biopsy During an endoscopy, a small tissue sample (biopsy) may be taken from the stomach lining for further examination. A biopsy can help identify the presence of H. pylori infection or other underlying conditions. Blood Tests Blood tests can detect signs of H. pylori infection, anemia, and other indicators of gastritis. These tests may also help identify autoimmune disorders associated with gastritis. Stool Tests Stool tests can detect the presence of H. pylori antigens or blood, which may indicate bleeding in the stomach. Treatment of Gastritis The treatment of gastritis depends on the underlying cause and severity of the condition. The primary goals of treatment are to reduce inflammation, alleviate symptoms, and address any underlying issues. Medications Several medications are commonly used to treat gastritis, including: Antacids: Over-the-counter antacids can neutralize stomach acid and provide quick relief from pain and discomfort. Proton Pump Inhibitors (PPIs): PPIs reduce the production of stomach acid, allowing the stomach lining to heal. Common PPIs include omeprazole and esomeprazole. H2 Receptor Blockers: These medications, such as ranitidine and famotidine, decrease the amount of acid produced by the stomach. Antibiotics: If H. pylori infection is present, a combination of antibiotics may be prescribed to eradicate the bacteria. Cytoprotective Agents: Medications like sucralfate can help protect the stomach lining from further damage. In addition to medications, making certain lifestyle and dietary changes can help manage gastritis symptoms and promote healing. Avoid Irritants: Limit or avoid alcohol, tobacco, spicy foods, and NSAIDs, as they can irritate the stomach lining. Eat Smaller, Frequent Meals: Eating smaller, more frequent meals can help reduce the burden on the stomach and alleviate symptoms. Incorporate a Gastritis Diet: A gastritis diet includes foods that are gentle on the stomach, such as lean proteins, non-acidic fruits, vegetables, and whole grains. Avoid acidic, spicy, and fatty foods. Manage Stress: Practice stress-reducing techniques, such as yoga, meditation, and deep breathing exercises, to help manage gastritis symptoms. If left untreated, gastritis can lead to several complications, including: Peptic Ulcers Chronic gastritis can result in the formation of peptic ulcers, which are open sores on the stomach lining. Peptic ulcers can cause severe pain, bleeding, and perforation of the stomach wall. Anemia Chronic gastritis can lead to bleeding in the stomach, resulting in iron-deficiency anemia. Anemia can cause fatigue, weakness, and shortness of breath. Stomach Cancer Long-term inflammation of the stomach lining, particularly when caused by H. pylori infection or autoimmune disorders, can increase the risk of developing stomach cancer. Gastritis is a swelling of the stomach lining. When the lining of the stomach is inflamed, it may lead to symptoms such as stomach pain, heartburn, nausea and vomiting.Types of gastritisThere are 4 types of gastritis:Acute gastritisOccurs when the stomach lining is inflamed for a short period of time. Often caused by infection of the stomach lining and usually lasts for a short period of time. The condition is usually caused by nonsteroidal anti-inflammatory drugs, excessive alcohol consumption, toxins, surgery, trauma, burns or severe infection.Chronic gastritisInvolves stomach lining irritation or inflammation for a long period of time. Often caused by Helicobacter pylori bacterial infection, chronic gastritis symptoms appear slowly over time.Erosive gastritisIs less common and typically does not cause too much inflammation. However, erosive gastritis can result in bleeding and ulcers in the stomach lining.Non-erosive gastritisRefers to inflammation of the stomach lining without any ulcers, breaks or bleeding.In most cases, gastritis does not display any symptoms. However, the most common symptoms of gastritis include:Blood in vomitBlack stools due to bleedingBurning feeling in the upper abdomen(belly)Pain in the upper abdomenNausea and indigestionLoss of appetiteWeight lossVomitingHiccupsGastritis may be caused by:Excessive alcohol consumptionPost-surgery, burns or traumatic injuryInfection caused by helicobacter pylori, a bacteria that weakens the protective lining of the stomach and causes acidic digestive juices to come into contact with the stomach wallsLong-term use of non-steroidal anti-inflammatory drugs (NSAIDs), such as aspirin and ibuprofenStress and chronic vomiting, such as in bulimia casesThe following factors increase your risk of developing gastritis:Bacterial infection Infection caused by Helicobacter pylori (H. pylori), a type of bacteria that enters the body and lives in the digestive system, can develop into gastritis.Excessive alcohol consumption Excessive drinking of alcohol can lead to irritation and erosion of the stomach lining, making the stomach secrete more digestive juices. This can lead to acute gastritis.Frequent use of pain relievers Regularly taking common pain relievers like aspirin, ibuprofen and naproxen may reduce the substance that helps preserve the stomach lining. This can lead to acute or chronic gastritis.Stress Extreme stress caused by injury, major surgery or severe infections can lead to acute gastritis.Other health conditions If you have autoimmune disorders such as Hashimoto's disease and type 1 diabetes, you have higher risk of developing gastritis. Gastritis is also more likely to happen to people with medical conditions such as Crohn's disease, HIV/AIDS, and parasitic infections.Age As the lining of the stomach tends to thin with age, older adults have a higher risk of developing gastritis. Older adults are also more likely to develop other factors that lead to gastritis such as H. pylori infection and autoimmune disorders. Left untreated, gastritis can lead to the following health problems:AnaemiaSome cases of gastritis can lead to gastrointestinal bleeding. This may cause anaemia, a condition wherein the total amount of red blood cells decreases. Anaemia can cause shortness of breath, weakness, and dizziness.Pernicious anaemiaGastritis caused by autoimmune problems may have an adverse effect on the body's absorption of vitamin B12. Insufficient vitamin B12 can lead to pernicious anaemia, which can cause you to feel weak and experience numbness in your hands and feet.PernititisWhen gastritis worsens the sores in your stomach or ulcer, stomach contents may spill into the abdomen. This may cause bacteria to spread and lead to peritonitis, an inflammation of the membrane lining the inner abdominal wall. Peritonitis may lead to a life-threatening inflammation called sepsis.Stomach cancerGastritis caused by H. pylori and autoimmune problems can lead to growths in the stomach lining, which may increase the risk of developing stomach cancer. You can prevent gastritis by observing proper hygiene practices and maintaining a healthy lifestyle. In general, you should:Avoid acidic and fatty foods.Avoid taking non-steroidal anti-inflammatory drugs.Have smaller meals instead of heavy meals throughout the day.Observe proper handwashing to avoid H. pylori bacterial infection.Learn to manage your stress properly.Lessen alcohol consumption.Lessen caffeine intake. This page has been reviewed by our medical content reviewers. Gastritis is an inflammation of the lining of the stomach. Inflammation is when part of the body becomes hot, red, swollen and painful as a response to injury. In the stomach, this inflammation can occur in response to a bacteria or as a result of damage to the lining of the stomach (for example, from smoking or alcohol use). Because the stomach needs to produce acid to break down foods, this acid can make the inflammation worse. Therefore, reducing the acid is the main treatment for gastritis. Many people with gastritis don't have any symptoms. However, gastritis can cause indigestion (dyspepsia) and pain in the upper abdomen just below the breastbone (sternum). The pain usually comes at night and may be worse on lying down. It may be eased by taking antacid tablets. Sometimes food can make the pain worse. Other gastritis symptoms which may occur include:Loss of appetite.Bloating,itching,feeling sick (nausea).Being sick suddenly (acute gastritis) or may develop slowly and last for a long period of time (chronic gastritis).Don't assume that pain in the upper abdomen is always a sign of gastritis - the pain could be caused by a wide range of other things, such as a non-ulcer dyspepsia, duodenal ulcer, stomach ulcer, gallstones or irritable bowel syndrome. See the separate leaflet called Abdominal pain.The length of symptoms can vary depending on the cause and how actively it is managed, either by lifestyle change or medication or a combination of both.The stomach normally produces acid to help with the digestion of food in your digestive tract and to kill bacteria.This acid is corrosive so some cells on the inside lining of the stomach produce a natural mucous barrier. This protects the lining of the stomach and the first part of the small intestine (the duodenum).There is normally a balance between the amount of acid being made and the mucous defence barrier. Gastritis may develop if there is an alteration in this balance, allowing the acid to damage the lining of the stomach. This alteration can be caused by:Infection with Helicobacter pyloriInfection with Helicobacter pylori is present in about 6 in 10 cases of chronic gastritis. The test for this is via a simple stool test. Worldwide more than 2 in 3 people have H. pylori and it is found in around 4 in 10 people in the UK. As it is so common, it is not certain that H. pylori is the cause of the symptoms in all people with gastritis and H. pylori. See the separate leaflet called Helicobacter pylori for more information.Anti-inflammatory medicinesAnti-inflammatory medicines are sometimes called NSAIDs. Many people take an anti-inflammatory medicine for joint inflammation (arthritis), muscular pains, etc.These medicines sometimes affect the mucous barrier of the stomach and allow acid to cause inflammation or an ulcer. SmokingSmoking is a common cause of gastritis. It also increases the risk of stomach cancer.Other causes of gastritisLess common causes of gastritis include: A stressful event - such as a bad injury or critical illness, or major surgery. An autoimmune reaction - when the immune system mistakenly attacks the body's own cells and tissues. (This may happen alongside have another autoimmune condition such as Hashimoto's thyroid disease or type 1 diabetes).Cocaine use.Drinking too much alcohol.Viruses, parasites, fungi and bacteria other than H. pylori.A GP can usually make a diagnosis of gastritis by taking a history of the symptoms and an examination of the abdomen. Mild gastritis does not usually need any tests.If gastritis doesn't get better quickly, or causes severe pain, then the GP may arrange some tests. These tests may include:Blood tests, including a test for anaemia, as gastritis occasionally causes some bleeding from your stomach lining.A test to detect the Helicobacter pylori bacteria. H. pylori can be detected in a stool test (faeces), or from a biopsy sample taken during an endoscopy. See the separate leaflet called Helicobacter pylori for more details.Gastroscopy (endoscopy) - this test can confirm gastritis. In this test a clinician looks inside the stomach by passing a thin, flexible telescope down the gullet (oesophagus). Small samples (biopsies) are usually taken of the stomach lining during endoscopy. These are sent to the laboratory to be looked at under the microscope. This also checks for stomach cancer.Lifestyle changesIt is sensible to try treating indigestion and upper stomach (epigastric) pain with changes to diet and lifestyle such as:Acid-suppressing medicationAntacids can be used as a treatment for gastritis to reduce the amount of acid in your stomach and allow the gastritis resolve.If treatment with antacid medicine is not enough, then a medicine called an H2 blocker (such as famotidine) may be used.An alternative medicine that may be used is a proton pump inhibitor (PPI) such as lansoprazole or omeprazole.See the separate leaflet called Indigestion medication for more information.If the gastritis is caused by Helicobacter pylori (H. pylori)The tests may show an infection with H. pylori. This can be treated with a combination of antibiotics and proton pump inhibitors. H. pylori treatment should not be used without confirmed H. pylori on a stool test. See the separate leaflet called Helicobacter pylori for more details about the treatment for H. pylori infection.If the gastritis is caused by an anti-inflammatory medicineIt is important to stop the anti-inflammatory medicine where possible. This allows the gastritis to heal. Acid-suppressing medicine will also usually be prescribed for several weeks. This stops the stomach from making acid and allows the gastritis to heal.It may not always be possible to stop the medication. Aspirin will often be needed, for example following a heart attack or stroke. Anti-inflammatory medication may occasionally be the only medication suitable for pain. It is important to discuss symptoms of gastritis with a doctor if it could be caused by medication as there may be alternative medications that could help. If not, another option is to take an acid-suppressing medicine each day indefinitely. This reduces the amount of acid made by the stomach and greatly reduces the chance of gastritis forming again.Seek medical attention if there is:Severe abdominal pain. Abdominal pain or any other indigestion symptoms lasting for more than a week.The gastritis starts after taking any medicine (prescription or over-the-counter).Weight loss without deliberately trying to diet.Difficulty swallowing, as if food is getting stuck.You need to call an emergency ambulance if:You are vomiting blood or the colour of the vomit is like coffee.You have any blood in your stools (faeces). (Bleeding from your stomach may make your stools look black.)Gastritis usually resolves without any complications. Very occasionally gastritis may develop into a stomach ulcer. This used to be more common but is less so nowadays with newer better treatments.Bleeding from the stomach lining may occur. This may cause vomiting of blood (haematemesis)or blood in the stools (often dark black tarry blood). If the bleeding is slow, there may be no obvious symptoms but a blood test may show anaemia.Gastritis is an inflammation, irritation, or erosion of the stomach lining. It can come on suddenly and last a short time (acute), or start gradually and be long-lasting (chronic).It's a common condition, affecting about 8 in every 1,000 people in the U.S. The acute form is often caused by an infection, too much alcohol, or medications that irritate the stomach. Across the world, up to half of the population is thought to have chronic gastritis-linked to infection with the Helicobacter pylori (H. pylori) bacteria. In addition to the acute and chronic forms, gastritis can be divided into types based on how it affects the protective lining of your stomach.Erosive gastritis. With this type, whatever causes gastritis leaves injuries or ulcers in your stomach lining.Non-erosive gastritis. People who have this type have stomach irritation but no ulcers. If you have a type of nonerosive gastritis called atrophic gastritis, the irritation causes your stomach lining to get thinner.Doctors may also identify gastritis by what causes it, such as:Gastritis is your body's response to weakness or damage in your stomach lining. Many things can lead to it, including:Long-term use of nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin or naproxenOveruse of alcohol, tobacco, or cocaineRepeated vomitingStress, such as that caused by an injury, surgery, or serious illnessInfections caused by bacteria such as H. pyloriOther infections, including parasitic infections, HIV/AIDS, and the viruses that cause "stomach flu"Bile reflux, in which a digestive fluid called bile backs up into your stomachAn autoimmune response in which your immune system attacks the cells of your stomach liningInflammatory conditions such as Crohn's disease, celiac disease, or sarcoidosisChemotherapy and radiation treatmentsBecause the stomach lining tends to get thinner with age, older people are at higher risk for gastritis.Symptoms of gastritis vary from person to person, and many people don't have any. Gastritis symptoms may include:Indigestion, a burning or gnawing feeling in your stomach that tends to happen between meals or at nightNausea and vomitingBloatingStomach pain in the belly areaHiccupsAppetite lossIf gastritis has caused a bleeding ulcer, you might:Vomit blood or coffee ground-like materialHave poop that looks black and tarryTo diagnose gastritis, your doctor will review your personal and family medical history and do a physical exam. They may also recommend any of the following tests:Upper gastrointestinal (GI) series or barium swallow. This is an X-ray that gives your doctor a look at the upper part of your digestive system. Before the X-ray, you swallow a chalky liquid called barium. It coats your organs to help your doctor see them. It can reveal whether there's erosion in your stomach lining.Upper endoscopy. An endoscope, a thin tube containing a tiny camera, is inserted through your mouth and down into your stomach to check your stomach lining for signs of inflammation. At the same time, they may also do a biopsy, in which they remove a tiny sample of tissue and send it to a lab for analysis.Stool tests. The doctor may check your red blood cell count to see if you have anemia, which is when you don't have enough red blood cells. They can also use blood tests to screen for H. pylori infection and pernicious anemia. Fecal occult blood test (stool test). This test checks for the presence of blood in your poop, a possible sign of gastritis.Breath test for H. pylori. You may have this test if your doctor thinks you may be infected with the H. pylori bacteria. You swallow a substance called urea, which the bacteria break down into carbon dioxide. You breathe into a bag, and the breath sample is tested for excess carbon dioxide.Gastritis treatment depends on what's causing it and how serious it is.Acute gastritis may go away on its own, or get better when you stop smoking, drinking alcohol, or taking certain drugs. If you have an alcohol or drug use disorder, your doctor can refer you to treatment programs. If NSAIDs are causing your gastritis, they can suggest alternative pain medications. If you have chronic gastritis, you'll need treatment to cure it permanently.Gastritis medications may include:Antacids. These are medications you can buy over the counter to ease indigestion and heartburn. They work by neutralizing stomach acids. There are many different types, including Maalox, Mylanta, Rolaids, and Tums. Talk to your doctor or pharmacist about what kind to take, and avoid those that contain aspirin. H2 blockers. Histamine-blocker (H2) drugs, available either over the counter or by prescription, reduce how much acid your stomach produces. They include cimetidine (Tagamet), famotidine (Pepcid), and nizatidine.Proton pump inhibitors. These drugs help block stomach acid production. They're also available over the counter or by prescription. These include dexlansoprazole (Dexilant), esomeprazole (Nexium), lansoprazole (Prevacid), omeprazole (Prilosec), pantoprazole (Protonix), and rabeprazole (Aciphex).Surface coating agents. These prescription drugs protect damaged stomach tissue from acid and enzymes so it can heal. They include sucralfate (Carafate) and misoprostol (Cytotec).Antibiotics. If your gastritis is caused by a bacterial infection, such as H. pylori, your doctor will likely prescribe antibiotics along with medications to reduce stomach acid.Anti-nausea medications. If you have nausea as a result of gastritis, you can take over-the-counter or prescription medications to ease this symptom.If an autoimmune disorder is causing your gastritis, your doctor can prescribe medications to treat that disorder. For autoimmune gastritis, they might recommend supplements of Vitamin B12, folic acid, or iron.If you have bile reflux or gastrointestinal (GI) bleeding, your doctor may suggest surgery to repair the problem. But this is uncommon.Gastritis usually doesn't cause long-term problems. But when it damages your stomach lining, complications can result, such as:Peptic ulcers. These painful sores in your stomach lining can cause bleeding and scarring.Gastric outlet obstruction: Scar tissue from ulcers or long-term inflammation can partially or fully block the opening between your stomach and intestine. This can hinder digestion and cause pain, nausea, and vomiting.Gastrointestinal perforation. An ulcer can eventually turn into a hole (perforation) in the wall of your stomach. This, in turn, could lead to an infection in your abdominal cavity called peritonitis.Anemia. Iron-deficiency anemia could result from blood loss due to bleeding ulcers or due to continued irritation of your stomach lining. It can also be caused by H. pylori infection or autoimmune gastritis, both of which keep your body from absorbing iron as well as it should. Gastritis may also lead to pernicious anemia, in which your body can't absorb enough Vitamin B12. Atrophic gastritis. Even nonerosive gastritis can lead to complications over time. The mucus layer in your stomach lining can get thinner and won't work as well as it should. Your body may not be able to properly absorb nutrients such as vitamin B12, folic acid, and iron. This can lead to nutrient deficiencies and anemia. Achlorhydria or hypochlorhydria. Atrophic gastritis sometimes keeps your stomach from making enough (hypochlorhydria) or any (achlorhydria) hydrochloric acid, a component of stomach (gastric) acid. This can interfere with digestion and keep your body from absorbing enough nutrients.Gastric intestinal metaplasia. This is a rare condition in which chronic gastritis leads to changes in the cells of your stomach lining, increasing your risk for stomach cancer.Stomach cancers. Atrophic gastritis raises your risk for adenocarcinoma of the stomach as well as mucosa-associated lymphoid tissue (MALT) lymphoma and neuroendocrine tumors.These things may help you avoid gastritis, but they can't prevent it completely. You can reduce your risk of developing gastritis by:Avoiding alcohol and tobacco:Alcohol and tobacco can irritate the stomach lining and make it more prone to damage, drink it in moderation if you drink it at all.Don't overuse NSAIDs. NSAIDs such as aspirin, ibuprofen, and naproxen can also irritate your stomach lining. Don't use them for long periods or at high doses. See your doctor if you need other pain-relief options.Manage stress. Since stress may contribute to gastritis, look for healthy ways to handle it. Relaxation techniques, such as mindfulness meditation, tai chi, or yoga, may help.Avoid foods and drinks that could irritate your stomach lining. Things such as coffee and spicy and greasy foods don't cause gastritis, but they could make your symptoms worse if you already have it.The outlook for people with gastritis depends on the cause of their illness. An occasional case of acute gastritis will likely get better on its own.If you often have gastritis or if it won't go away, see a doctor. Medication or changes to your lifestyle will most likely improve your symptoms. If you have trouble quitting smoking or have a substance abuse disorder, your doctor can recommend techniques and programs to help you succeed.If another condition is causing your gastritis, successfully treating that condition should also improve your stomach issues.Gastritis is irritation of your stomach lining. It's often caused by an infection or by the overuse of alcohol tobacco or over-the-counter pain relievers. An occasional case will probably go away without treatment, but long-lasting (chronic) gastritis should be treated by a doctor.How do I get gastritis to go away?The best way to get rid of gastritis is to deal with whatever caused it. You might need to stop smoking or cut down on alcohol or over-the-counter painkillers. Or you may need to be treated for an infection or other condition that is causing your symptoms or making them worse.How long does gastritis last?Acute gastritis may last a few days. Chronic gastritis can last months or even years.What foods are good for gastritis?There's no such thing as a gastritis diet because experts don't think diet plays a role in most cases of gastritis. But drinking too much alcohol can cause it, as can eating a food you're allergic to. How to ease gastritis pain fast?Antacids can quickly ease the pain of gastritis by neutralizing stomach acids. But they don't address its causes.What to eat when you have gastritis?When you have symptoms, it may be best to limit:AlcoholCaffeineSodasSpicy and fatty foodsAcidic foods such as citrus fruitsTo help digestion, eat more frequent and smaller meals. Focus on less-processed foods such as fruits and veggies, nuts and seeds, beans, eggs, and small amounts of poultry and lower-fat meats.Listen to your body, and notice whether any foods affect your symptoms. Keeping a food diary can help you figure this out. Your doctor or a dietitian can give you diet recommendations based on your own needs and medical history. Gastritis is a swelling of the stomach lining. When the lining of the stomach is inflamed, it may lead to symptoms such as stomach pain, heartburn, nausea and vomiting.Types of gastritisThere are 4 types of gastritis:Acute gastritisInvolves a sudden inflammation of the stomach lining and usually lasts for a short period of time. The condition is usually caused by nonsteroidal anti-inflammatory drugs, excessive alcohol consumption, toxins, surgery, trauma, burns or severe infection.Chronic gastritisInvolves stomach lining irritation or inflammation for a long period of time. Often caused by Helicobacter pylori bacterial infection, chronic gastritis symptoms appear slowly over time.Erosive gastritisIs less common and typically does not cause too much inflammation. However, erosive gastritis can result in bleeding and ulcers in the stomach lining.Non-erosive gastritisRefers to inflammation of the stomach lining without any ulcers, breaks or bleeding.In most cases, gastritis does not display any symptoms. However, the most common symptoms of gastritis include:Blood in vomitBlack stools due to bleedingBurning feeling in the upper abdomen(belly)Pain in the upper abdomenNausea and indigestionLoss of appetiteWeight lossVomitingHiccupsGastritis may be caused by:Excessive alcohol consumptionPost-surgery, burns or traumatic injuryInfection caused by helicobacter pylori, a bacteria that weakens the protective lining of the stomach and causes acidic digestive juices to come into contact with the stomach wallsLong-term use of non-steroidal anti-inflammatory drugs (NSAIDs), such as aspirin and ibuprofenStress and chronic vomiting, such as in bulimia casesThe following factors increase your risk of developing gastritis:Bacterial infection Infection caused by Helicobacter pylori (H. pylori), a type of bacteria that enters the body and lives in the digestive system, can develop into gastritis.Excessive alcohol consumption Excessive drinking of alcohol can lead to irritation and erosion of the stomach lining, making the stomach secrete more digestive juices. This can lead to acute gastritis.Frequent use of pain relievers Regularly taking common pain relievers like aspirin, ibuprofen and naproxen may reduce the substance that helps preserve the stomach lining. This can lead to acute or chronic gastritis.Stress Extreme stress caused by injury, major surgery or severe infections can lead to acute gastritis.Other health conditions If you have autoimmune disorders such as Hashimoto's disease and type 1 diabetes, you have higher risk of developing gastritis. Gastritis is also more likely to happen to people with medical conditions such as Crohn's disease, HIV/AIDS, and parasitic infections.Age As the lining of the stomach tends to thin with age, older adults have a higher risk of developing gastritis. Older adults are also more likely to develop other factors that lead to gastritis such as H. pylori infection and autoimmune disorders. Left untreated, gastritis can lead to the following health problems:AnaemiaSome cases of gastritis can lead to gastrointestinal bleeding. This may cause anaemia, a condition wherein the total amount of red blood cells decreases. Anaemia can cause shortness of breath, weakness, and dizziness.Pernicious anaemiaGastritis caused by autoimmune problems may have an adverse effect on the body's absorption of vitamin B12. Insufficient vitamin B12 can lead to pernicious anaemia, which can cause you to feel weak and experience numbness in your hands and feet.PernititisWhen gastritis worsens the sores in your stomach or ulcer, stomach contents may spill into the abdomen. This may cause bacteria to spread and lead to peritonitis, an inflammation of the membrane lining the inner abdominal wall. Peritonitis may lead to a life-threatening inflammation called sepsis.Stomach cancerGastritis caused by H. pylori and autoimmune problems can lead to growths in the stomach lining, which may increase the risk of developing stomach cancer. You can prevent gastritis by observing proper hygiene practices and maintaining a healthy lifestyle. In general, you should:Avoid acidic and fatty foods.Avoid taking non-steroidal anti-inflammatory drugs.Have smaller meals instead of heavy meals throughout the day.Observe proper handwashing to avoid H. pylori bacterial infection.Learn to manage your stress properly.Lessen alcohol consumption.Lessen caffeine intake. This page has been reviewed by our medical content reviewers. Gastritis is when the lining of your stomach becomes irritated (inflamed). It can cause pain, indigestion and feeling sick. Treatments include antacids, alginate and antibiotics. Symptoms of gastritis include:tummy painindigestionfeeling full and bloatedfeeling sick (nausea)not feeling as hungry as usualburping and farting you're vomiting bright red blood or your vomit looks like ground coffeeyour poo is black, sticky and extremely smellyyou have severe tummy or chest pain that started suddenlyDo not drive to A&E. Ask someone to drive you or call 999 and ask for an ambulance.Bring any medicines you take with you. You have symptoms of gastritis and:you've lost your appetiteyou feel full after a very small mealyou've recently lost weight without trying too feels like you have a lump in your tummyit's painful or difficult to swallowyou keep being sickThese can be serious, so they need to be checked quickly.You can call 111 or get help from 111 online. you have tummy pain or indigestion for longer than 1 weekyour tummy pain is getting worse or keeps coming back Causes of gastritis include:infection with a bacteria called helicobacter pylori (H. pylori)taking anti-inflammatory painkillers (such as ibuprofen) and aspirindrinking too much alcoholbeing very stressed and unwell, such as after surgeryGastritis can also be caused by a problem with your immune system where it attacks the lining of your stomach. To find out what's causing gastritis symptoms, your doctor might arrange tests such as a breath test to check for the bacteria helicobacter pylori (H. pylori); you'll be given a special drink and your breath is checked afterwards a test on a sample of your poop blood testYou should be told how to get ready for a breath test around 4 weeks before it happens. Treatment for gastritis depends on what's causing it. You might need:antibioticsmedicines to control stomach acid and stop it from rising into your food pipe (oesophagus), such as antacids, proton pump inhibitors or alginateso talk to your doctor about stopping anti-inflammatory painkillers (such as ibuprofen) or aspirin and trying a different medicine, if possiblesto stop drinking alcohol, if gastritis is caused by alcoholc If it's not treated, gastritis may get worse and cause a stomach ulcer.If gastritis is not getting better, or it's causing severe symptoms, a GP might refer you to a specialist stomach doctor (gastroenterologist). They might do a test to look inside your stomach, called a gastroscopy. If gastritis is causing mild indigestion symptoms, there are things you can do to help. reduce the amount of drinks you have that contain caffeine, such as tea, coffee, cola and energy drinks lie on an extra pillow in bed so your head and shoulders are higher, to help stop stomach acid rising up your throat while you sleep lose weight if you're overweight talk to your doctor if you regularly take anti-inflammatory painkillers (such as ibuprofen) or aspirin do not eat 3 to 4 hours before going to bed do not have food or drink that's acidic (such as orange juice), fizzy, spicy or fatty do not drink alcohol do not smoke A pharmacist can help with mild indigestionA pharmacist can recommend:medicines to help stop stomach acid from irritating your stomach and oesophagus, such as antacids and alginatesmedicines that reduce the amount of acid your stomach makes, such as proton pump inhibitorsSome indigestion medicines are taken after eating, and some are taken before eating. Check the information leaflet that comes with the medicine. Page last reviewed: 27 October 2022 Next review due: 27 October 2025 Can you answer a 5 minute survey about your visit today? Gastritis may not cause any noticeable symptoms. If it does, it may mean that it's more severe or it's been going on for a long time. Symptoms may happen when your stomach lining is worn down enough that it can defend itself against its own acids and enzymes anymore. But it can lead to bleeding and ulcers in the lining of the stomach.Gastritis doesn't cause noticeable symptoms in everyone. The most common symptoms are:nauseavomitinga feeling of fullness in your upper abdomen, particularly after eatingindigestionIf you have erosive gastritis, you might experience different symptoms, including:black, tarry stools vomiting blood or material that looks like coffee groundsThe treatment for gastritis depends on the cause of the condition. If you have gastritis caused by nonsteroidal anti-inflammatory drugs (NSAIDs) or other medications, avoiding those drugs may be enough to relieve your symptoms. If you think your prescription medication is causing gastritis, talk with your prescriber before stopping or modifying your dosage.Doctors routinely treat gastritis as a result of H. pylori with antibiotics in order to kill the bacteria.In addition to antibiotics, several other types of medication are used to treat gastritis:Medications called proton pump inhibitors work by blocking cells that create stomach acid. Common proton pump inhibitors include:omeprazole (Prilosec)lansoprazole (Prevacid)esomeprazole (Nexium)However, long-term use of these medications, especially at high doses, can lead to an increased risk of spine, hip, and wrist fractures. It can also lead to increased risk of renal failure, dementia, and nutrient deficiencies.Speak with your doctor before beginning one of these medications to check that it is right for you.Famotidine (Pepcid) is one example of a medication that reduces the amount of acid your stomach produces. By lowering the amount of acid that's released into your digestive tract, these medications relieve the pain of gastritis and allow your stomach lining to heal>Your doctor may recommend that you use antacids for rapid relief of gastritis pain. These medications can neutralize the acid in your stomach.Some antacids may cause diarrhea or constipation, so talk with your doctor if you experience any of these side effects.Shop for antacids online.Probiotics have been shown to help replenish digestive flora and heal gastric ulcers. However, there's no evidence that they have any impact on acid secretion. There are currently no guidelines supporting the use of probiotics in ulcer management.Shop for probiotic supplements online.Weekness in your stomach lining allows digestive n to damage and inflame it, causing gastritis. Having a thin or damaged stomach lining raises your risk for gastritis.A gastrointestinal bacterial infection can also cause gastritis. The most common bacterial infection that causes it is H. pylori, a bacterium that infects the lining of the stomach. The infection is usually passed from person to person, but it can also be transmitted through contaminated food or water.Certain conditions and activities may increase your risk for developing gastritis. Other risk factors include:extreme alcohol consumptionroutine use of NSAIDs like ibuprofen and aspirinocaine usage, because the stomach lining thin naturally with age tobacco useOther less common risk factors include:stress autoimmune disordersdigestive disorders like Crohn's diseasereal infections>Your doctor will perform a physical exam, ask about your symptoms, and ask for your family history. They may also recommend a breath, blood, or stool test to check for H. pylori. In addition, your doctor may:Perform an upper GI endoscopy. This is to check for inflammation in the esophagus, stomach, and duodenum. Your doctor may take a small sample, or biopsy, of the lining of the stomach. A pathologist will examine this sample for anything unusual under a microscope.Perform an upper GI series. This involves taking X-rays of your digestive tract after you swallow a barium solution. This will help distinguish areas of concern.Send you for a blood test. This is to check for other causes for your gastritis symptoms or signs of complications.Ask you for a stool sample. This may rule out an H. pylori infection or blood in your stool. Blood may indicate there's bleeding in your stomach.Ask you to do a urea breath test. This also tests for an H. pylori infection by having you swallow a urea capsule and then seeing whether you breathe out carbon dioxide atoms. This would indicate you have the infection.If you need help finding a primary care doctor, you can browse doctors in your area through the Healthline FindCare tool.If your gastritis is left untreated, it can lead to a variety of complications. Certain forms of gastritis can increase your risk of developing stomach cancer, particularly in people with thinned stomach linings. Complications may include:anemiadeiciencies in vitamin B12, vitamin D, folic acid, vitamin C, zinc, calcium, and magnesiumbleeding in the stomachach perforation inside the stomachpeptic ulcerschronic atrophic gastritis, which causes the loss of cells in the gastric glands in addition to inflammationgastric metaplasia and dysplasia (which are types of precancerous lesions of the stomach)achlorhydria, which prevents the stomach from producing the acid it needs to digest food properlyachloria of the stomachcancers such as adenocarcinoma (gastric cancer), mucosa-associated lymphoid tissue (MALT) lymphoma, and neuroendocrine tumors (NET)Because of these potential complications, it's important to consult with your doctor if you experience any symptoms of gastritis, especially if they're chronic.Preventative strategies may depend on your health and whether or not you have any conditions that put you at risk for developing gastritis. But, since gastritis doesn't always have a clear cause, it can be hard to prevent.However, there are some things you can do:Maintaining good hygiene habits. Habits like handwashing may help you reduce the risk of having a H. pylori infection.Taking good care of your mental health. Self-care and de-stressing practices may reduce your risk of developing stress-induced gastritis.Eating smaller meals more slowly and regularly. Also, avoiding or limiting fried, salty, sugary and spicy foods (these are things that research shows could trigger gastritis symptoms).Quitting smoking, if you smoke.Avoiding or limiting alcohol and caffeine.The outlook for gastritis depends on the underlying cause. Acute gastritis usually resolves quickly with treatment. H. pylori infections, for example, can often be treated with one or two rounds of antibiotics. However, sometimes treatment fails and it can turn into chronic, or long-term, gastritis. Talk with your doctor to develop an effective treatment plan for you.

Is antral gastritis dangerous. Is antral gastritis common. What is chronic antral gastritis. What is severe antral gastritis. Gastritis antral cronica difusa. Gastritis cronica fisiopatologia. Is antral gastritis serious. Gastritis antral cronica difusa no atrofica activa moderada. Gastritis antral cronica. Gastritis cronica antral difusa moderada.

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