

Right

Gallstones
Stomach Ulcer
Pancreatitis

Kidney stones
Urine Infection
Constipation
Lumbar hernia

Appendicitis
Constipation
Pelvic Pain (Gynae)
Groin Pain
(Inguinal Hernia)

Stomach Ulcer
Heartburn/ Indigestion
Pancreatitis, Gallstones
Epigastric hernia

Pancreatitis
Early Appendicitis
Stomach Ulcer
Inflammatory Bowel
Small bowel
Umbilical hernia

Urine infection
Appendicitis
Diverticular disease
Inflammatory bowel
Pelvic pain (Gynae)

Left

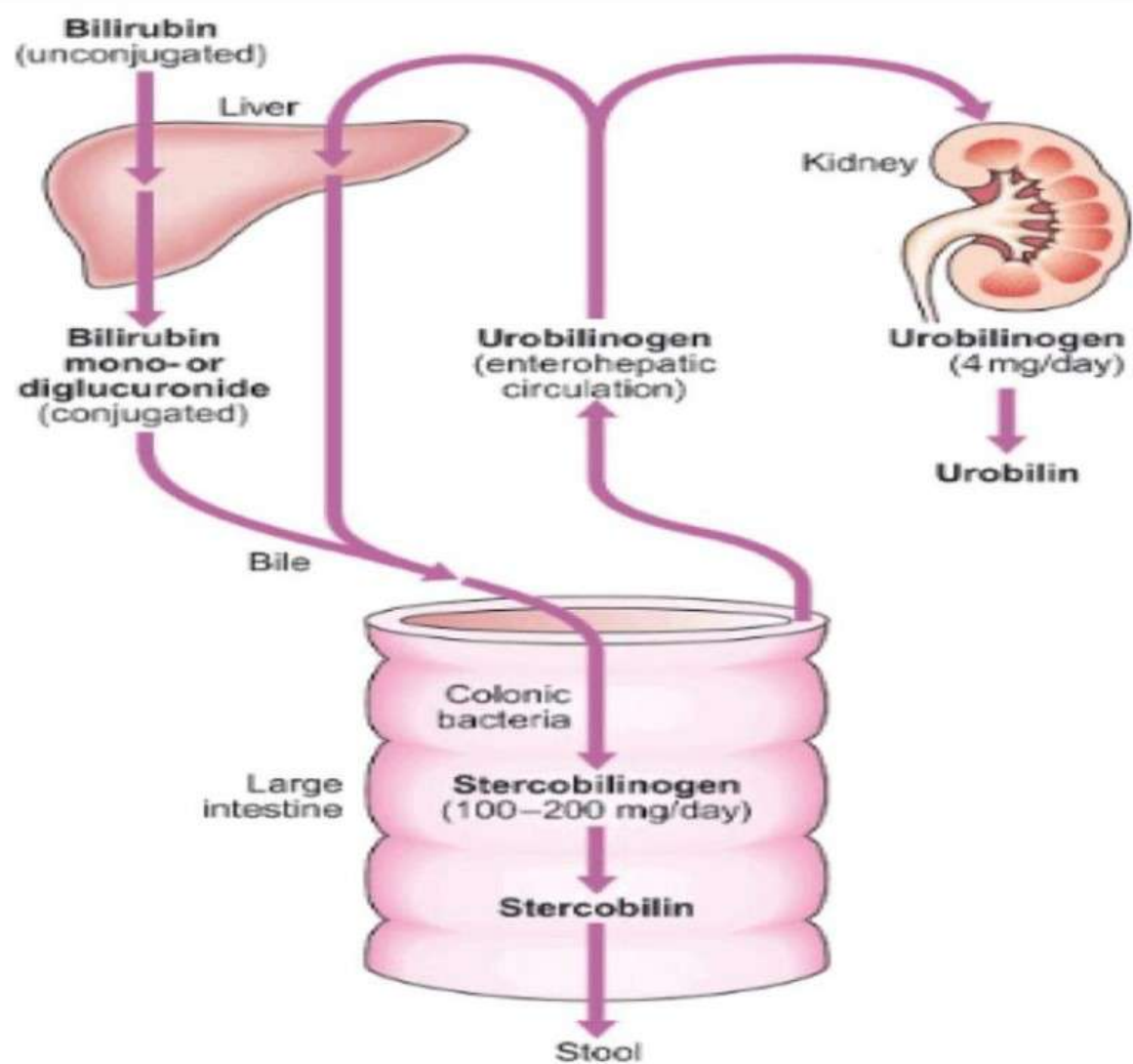
Stomach
Ulcer
Duodenal
Ulcer
Biliary Colic
Pancreatitis

Kidney Stones
Diverticular Disease
Constipation
Inflammatory bowel
disease

Diverticular Disease
Pelvic pain (Gynae)
Groin Pain
(Inguinal Hernia)

Serum-ascites albumin gradient (SAAG)

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



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8.5 Diagnosing abdominal pain

	Disorder			
	Peptic ulcer	Biliary colic	Acute pancreatitis	Renal colic
Site	Epigastrium	Epigastrium/right hypochondrium	Epigastrium/left hypochondrium	Loin
Onset	Gradual	Rapidly increasing	Sudden	Rapidly increasing
Character	Gnawing	Constant	Constant	Constant
Radiation	Into back	Below right scapula	Into back	Into genitalia and inner thigh
Timing				
Frequency/periodicity	Remission for weeks/months	Able to enumerate attacks	Able to enumerate attacks	Usually a discrete episode
Special times	Nocturnal and especially when hungry	Unpredictable	After heavy drinking	Following periods of dehydration
Duration	$\frac{1}{2}$ –2 hours	4–24 hours	>24 hours	4–24 hours
Exacerbating factors	Stress, spicy foods, alcohol, non-steroidal anti-inflammatory drugs (NSAIDs)	Unable to eat during bouts	Alcohol Unable to eat during bouts	
Relieving factors	Food, antacids, vomiting		Eased by <u>sitting upright</u>	
Severity	Mild to moderate	Severe	Severe	Severe