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Gastroparesis

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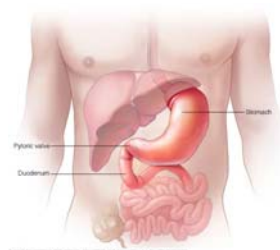
Overview

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Gastroparesis is a condition that affects the normal spontaneous movement of the muscles (motility) in your stomach. Ordinarily, strong muscular contractions propel food through your digestive tract. But if you have gastroparesis, your stomach's motility is slowed down or doesn't work at all, preventing your stomach from emptying properly.

Certain medications, such as opioid pain relievers, some antidepressants, and high blood pressure and allergy medications, can lead to slow gastric emptying and cause similar symptoms. For people who already have gastroparesis, these medications may make their condition worse.

Gastroparesis can interfere with normal digestion, cause nausea and vomiting, and cause problems with blood sugar levels and



Stomach and pyloric valve

Your stomach is a muscular sac about the size of a small melon that expands when you eat or drink to hold as much as a gallon of food or liquid. Once your stomach pulverizes the food, strong muscular contractions (peristaltic waves) push the food toward the pyloric valve, which leads to the upper portion of your small intestine (duodenum).

nutrition. The cause of gastroparesis is usually unknown. Sometimes it's a complication of diabetes, and some people develop gastroparesis after surgery. Although there's no cure for gastroparesis, changes to your diet, along with medication, can offer some relief.

Symptoms

Signs and symptoms of gastroparesis include:

- Vomiting
- Nausea
- A feeling of fullness after eating just a few bites
- Vomiting undigested food eaten a few hours earlier
- Acid reflux
- Abdominal bloating
- Abdominal pain
- Changes in blood sugar levels
- Lack of appetite
- Weight loss and malnutrition

Many people with gastroparesis don't have any noticeable signs and symptoms.

When to see a doctor

Make an appointment with your doctor if you have any signs or symptoms that worry you.

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Causes

It's not always clear what leads to gastroparesis. But in many cases, gastroparesis is believed to be caused by damage to a nerve that controls the stomach muscles (vagus nerve).

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The vagus nerve helps manage the complex processes in your digestive tract, including signaling the muscles in your stomach to contract and push food into the small intestine. A damaged vagus nerve can't send signals normally to your stomach muscles. This may cause food to remain in your stomach longer, rather than move normally into your small intestine to be digested.



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The vagus nerve can be damaged by diseases, such as diabetes, or by surgery to the stomach or small intestine.

Risk factors

Factors that can increase your risk of gastroparesis:

- Diabetes
- Abdominal or esophageal surgery
- Infection, usually a virus
- Certain medications that slow the rate of stomach emptying, such as narcotic pain medications
- Scleroderma (a connective tissue disease)
- Nervous system diseases, such as Parkinson's disease or multiple sclerosis
- Hypothyroidism (low thyroid)

Women are more likely to develop gastroparesis than are men.

Complications

Gastroparesis can cause several complications, such as:

- **Severe dehydration.** Ongoing vomiting can cause dehydration.
- **Malnutrition.** Poor appetite can mean you don't take in enough calories, or you may be unable to absorb enough nutrients due to vomiting.
- **Undigested food that hardens and remains in your stomach.** Undigested food in your stomach can harden into a solid mass called a bezoar. Bezoars can cause nausea and vomiting and may be life-threatening if they prevent food from passing into your small intestine.

- **Unpredictable blood sugar changes.** Although gastroparesis doesn't cause diabetes, frequent changes in the rate and amount of food passing into the small bowel can cause erratic changes in blood sugar levels. These variations in blood sugar make diabetes worse. In turn, poor control of blood sugar levels makes gastroparesis worse.
- **Decreased quality of life.** An acute flare-up of symptoms can make it difficult to work and keep up with other responsibilities.

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