Patient information: GI bleed (The Basics)

Written by the doctors and editors at UpToDate

What is a GI bleed? — "GI" stands for "gastrointestinal." "GI system" (or "GI tract") is the medical term for all the organs in your body that process food (figure 1). The GI system includes your:

- Esophagus (the tube that connects your mouth to your stomach)
- Stomach
- Small intestine (also known as the small bowel)
- Large intestine (also known as colon or large bowel)
- Rectum

A GI bleed is when any of these organs start to bleed. Often you do not know you are bleeding, because it's happening inside your body. But sometimes there are signs that it is happening.

There are 2 common types of GI bleeds. "Upper GI bleeds" affect the esophagus, the stomach, and the first part of the small intestine. "Lower GI bleeds" affect the colon and rectum. Bleeding can also happen in the middle of the small intestine, but this is much less common. This is sometimes called "mid-GI bleeding."

What are the symptoms of a GI bleed? — The symptoms are a bit different depending on whether you have an upper or lower GI bleed. Some people have no symptoms. They find out they have bleeding when a doctor or nurse does a rectal exam on them.

The symptoms of an upper GI bleed can include:

- Vomiting blood or something that looks like coffee grounds
- Diarrhea or bowel movements that look like black tar (this can happen with lower GI bleeds, too, but it is less common)

The symptoms of a lower GI bleed can include:

- Bowel movements that look bloody (this can happen with upper GI bleeds, too, but it is less common)

Symptoms that can happen with either an upper or lower GI bleed include:

- Feeling weak, light-headed, or woozy (especially if you lose a lot of blood)
- A racing heartbeat (if you lose a lot of blood)
- Cramps or belly pain
- Diarrhea
- Pale skin

Should I see a doctor or nurse? — See your doctor or nurse right away if you:

- Vomit blood or something that looks like coffee grounds
- Have a bowel movement that looks like tar or has blood in it
- Feel weak, light-headed, or woozy
- Have a racing heartbeat
Have severe belly pain
Turn much paler than normal

What can cause a GI bleed? — The most common causes of GI bleeds include:

- Ulcers in the stomach or small intestines (ulcers are sores on the lining of the GI tract)
- Swollen veins in the esophagus called "varices"
- Abnormal blood vessels called "arteriovenous malformations" (or AVMs, for short)
- Diverticulosis (a condition in which tiny pouches form in the lining of the gut)
- Crohn’s disease or ulcerative colitis (conditions that can cause sores to form in the lining of the gut)
- Swollen veins in the rectum called "hemorrhoids" or tears around the anus
- Cancer (rarely)

Is there a test for a GI bleed? — Yes. If your doctor or nurse suspects you have a GI bleed, he or she will order 1 or more of these tests:

- Blood tests to:
  - See if you have enough red blood cells (the cells that carry oxygen)
  - See if your blood is clotting normally
  - See if your liver is working normally
- An upper endoscopy – For this test, a doctor gives you medicine to make you sleepy and relaxed. Then he or she puts a thin tube called an endoscope in your mouth and down your throat. The tube has a light on the end and a camera that sends images of your GI tract to a TV screen. If the doctor sees any spots that are bleeding, he or she can use tools that go through the endoscope to help stop the bleeding.
- A colonoscopy – This test is similar to an endoscopy, but it involves going in through the rectum (figure 2).
- Imaging tests that involve putting a dye or weakly radioactive chemical into the blood so that doctors can trace where the blood goes.
- A capsule endoscopy – This test uses a small camera about the size of a vitamin pill. You swallow the camera, and it sends pictures to a recording device that you wear on a belt for 8 hours. A doctor then looks at the pictures. This test lets doctors look at the small intestine, which is hard to see with endoscopy or colonoscopy because it is very long. After the test, the camera will pass with a bowel movement. Most people never see it come out.

How is a GI bleed treated? — Depending on how much blood you have lost and what seems to be causing your bleeding, you might get 1 or more of these treatments:

- Oxygen through a mask or a tube that sits under your nose
- Blood or fluids into 1 of your veins (to replace blood you lost)
- Medicines to reduce stomach acid
- Medicines help clean out and empty your gut (so that doctors can see clearly what is happening inside)
  - Antibiotics
  - A small tube that goes up your nose and down your throat so doctors can rinse out your stomach

Depending on where the bleed seems to be, you might also have an endoscopy, a colonoscopy, or both. This can help the doctors find the spot or spots that are bleeding. Plus, doctors can sometimes use the endoscope or colonoscope to seal off blood vessels and stop them from bleeding.

After the bleeding has stopped, your doctor or nurse will probably want to follow up with you to learn why you started bleeding in the first place. If you have ulcers or another condition that could lead to bleeding, the doctor or nurse will want to make sure those problems are treated.

**Can a GI bleed be prevented?** — You can lower your chances of getting a GI bleed by:

- Not taking medicines called NSAIDs too often, unless your doctor tells you it is OK. Some people need to take these medicines on a regular basis, but they can increase the risk of bleeding. Examples of these medicines include aspirin, ibuprofen (sample brand names: Advil, Motrin), and naproxen (sample brand names: Aleve, Naprosyn). If you have to take these medicines on a regular basis, your doctor might give you another medicine to decrease your risk of bleeding.
- Being treated for stomach ulcers if you have them
- Taking medicines called beta blockers if you have cirrhosis and your doctor prescribes them

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This drawing shows the organs in the body that process food. Together these organs are called "the digestive system," or "digestive tract." As food travels through this system, the body absorbs nutrients and water.

Graphic 66110 Version 4.0
Colonoscopy

During a colonoscopy, you lie on your side and the doctor or nurse puts a thin tube with a camera into your anus (from behind). Then the doctor or nurse advances the tube into the rectum and colon. The camera sends video pictures from inside your colon to a television screen.

Graphic 52258 Version 4.0