Abdominal Pain in OPD: Art of problem solving

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20-2-2010
Patients with acute abdomen.

Out-patient department or the emergency room.

Utilizing clinical skills alone.

Accuracy
History

• Incapacitating, sudden, and quickly reaches peak intensity:
  Perforation of a duodenal ulcer
  Rupture of an abdominal aortic aneurysm

• Increases over a period of one to several hours:
  Appendicitis
  Acute cholecystitis
Unrelenting, constant:

Acute pancreatitis

Previous intraperitoneal operation:

Obstruction of the small intestine
Red flags

Check list:

History: Trauma, Corrosive/Foreign body ingestion. Risk factors of cardiovascular disease.

Examination:
Drowsiness
Pulse
BP
Temperature
Respiratory rate
Acetone smell
Jaundice
Physical examination

- Serious intraperitoneal pathology
  Anxious, pale face. Sweating, dilated pupils, and shallow breathing.

In the presence of chemical or bacterial contamination of the peritoneum, the patient tends to lie *immobile*.

- Ureteral colic or mesenteric ischemia
  Restless, with frequent *changes in posture* in an attempt to relieve discomfort.
Perform a *standard* though *quick* abdominal examination
Valsalva Maneuver (20 seconds): pinpoint localization

Obturator sign

Psoas sign

Carnett’s sign
Obturator test
Psoas test
Carnett’s sign
A daily story

A young female with acute abdominal pain with tender abdomen and no guarding. Examination is otherwise normal.

The doctor looks at the patient’s eyes while palpating the abdomen.

Two possibilities:
Eyes open
Eyes closed
In reality, some keep their eyes closed, and some keep on watching the examiner’s hand pressing the abdomen.

Eyes closed: *non-specific abdominal pain*

**Closed eyes sign**

*The vast majority of patients are females usually young*
Another trick

The Stethoscope sign

Use your stethoscope for palpation

Tenderness elicited by the hand and not by a stethoscope
Closed eyes sign
and
Stethoscope sign

ONLY SUPPORTIVE SIGNS
The abdomen is like a stage
Enclosed within a fleshy cage
The symptoms are the actors who,
Although they are motley crew
Act often with consummate art
The major or the minor part
Nor do they usually say
Who is the author of the play
That’s for you to try and guess
A problem, which I must confess
Is made less easy for the fact
You seldom see the opening act
And by the time that you arrive
The victim may be just alive

Sir Vincent Zachary Cope