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Gastritis/Duodenitis

Medically reviewed by [Saurabh Sethi, MD, MPH](#) on July 30, 2018 — Written by Rose Kivi and Brian Wu

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What are gastritis and duodenitis?

Gastritis is inflammation of your stomach lining. Duodenitis is inflammation of the duodenum. This is the first part of the small intestine, which is located just below your stomach. Both gastritis and duodenitis have the same causes and treatments.

Both conditions may occur in men and women of all ages. The conditions may be acute or chronic. The acute forms come on suddenly and lasts for a short time. The chronic form may progress slowly and last for months or years. The conditions are often curable and generally don't cause any long-term complications.

What causes gastritis and duodenitis?

The most common cause of [gastritis](#) and duodenitis is a bacterium called *Helicobacter pylori*. Large amounts of the bacteria invading your stomach or small intestine can cause inflammation.

H. pylori may be transferred from person to person, but exactly how is unclear. It's believed to be spread through contaminated food and water, although this is less common in the United States. According to the National Digestive Diseases Information Clearinghouse, approximately 20 to 50 percent of people in the United States may be infected with *H. pylori*. By comparison, up to 80 percent of people in some developing countries are infected with the bacteria.

Other common causes of gastritis and duodenitis include the long-term use of certain medications, such as aspirin, ibuprofen, or [naproxen](#), or drinking too much [alcohol](#).

Less common causes include:

- [Crohn's disease](#)
- [an autoimmune condition](#) that results in [atrophic gastritis](#)
- [celiac disease](#)
- [bile reflux](#)
- a combination of certain viral infections — such as [herpes simplex](#) — with a weakened immune

system

- [traumatic injury](#) to your stomach or small intestine
- being placed on a [breathing machine](#)
- extreme stress caused by major surgery, severe body trauma, or [shock](#)
- ingesting caustic substances or [poisons](#)
- [smoking cigarettes](#)
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Gastritis, duodenitis, and inflammatory bowel disease

[Inflammatory bowel disease \(IBD\)](#) is the chronic inflammation of part or all of your digestive tract. The exact cause is unknown, but doctors believe that IBD may be the result of an immune disorder. A combination of factors from the environment and a person's genetic makeup also appear to play a role. Examples of IBD include [ulcerative colitis](#) and Crohn's disease. Crohn's disease may affect any part of your digestive tract and often spreads beyond the intestinal lining and into other tissues.

A study published in *Inflammatory Bowel Diseases* reported that people with IBD are more likely to develop a form of gastritis or duodenitis that isn't caused by *H. pylori* than people who don't have the disease.

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What are the symptoms of gastritis and duodenitis?

Gastritis and duodenitis don't always produce signs or symptoms. When they do, common symptoms include:

- [nausea](#)
- [vomiting](#)
- stomach burning or [cramping](#)
- stomach pain that goes through to the back
- [indigestion](#)
- [feeling full shortly after you begin eating](#)

In some cases, [your stool](#) may appear [black in color](#) and vomit may look like [used coffee grounds](#). These symptoms can indicate [internal bleeding](#). Call your doctor right away if you experience either of these symptoms.

How are gastritis and duodenitis diagnosed?

There are several tests your doctor can use to diagnose gastritis and duodenitis. *H. pylori* can often be detected through blood, stool, or breath tests. For a breath test, you'll be instructed to drink a clear, tasteless liquid and then breathe into a bag. This will help your doctor detect any extra carbon dioxide gas in your breath if you're infected with *H. pylori*.

Your doctor may also perform an [upper endoscopy](#) with [biopsy](#). During this procedure, a small camera attached to a long, thin, flexible tube is moved down your throat to look into the stomach and small intestine. This test will allow your doctor to check for inflammation, bleeding, and any abnormally appearing tissue. Your doctor may take a few small tissue samples for further testing to assist in the diagnosis.

How are gastritis and duodenitis treated?

The type of recommended treatment and recovery time will depend on the cause of your condition. Gastritis and duodenitis often clear up without complications, especially when they're caused by medications or lifestyle choices.

Antibiotics

If *H. pylori* is the cause, these infections are treated with antibiotics. Your doctor may recommend a combination of drugs to kill the infection. You'll most likely need to take antibiotics for two weeks or longer.

Acid reducers

Reducing acid production in the stomach is an important step in treatment. Over-the-counter acid blockers, which are drugs that work to reduce the amount of acid released into your digestive tract, may be recommended. These include:

- cimetidine (Tagamet)
- famotidine (Pepcid)
- ranitidine (Zantac)

[Proton pump inhibitors](#) that block cells that produce acid are most often needed to treat these conditions. They may also need to be taken long-term. Some of these include:

- [esomeprazole](#) (Nexium)
- [lansoprazole](#) (Prevacid)
- [omeprazole](#) (Prilosec)

[Shop for proton pump inhibitors online.](#)

Antacids

For temporary relief of your symptoms, your doctor may suggest [antacids](#) to neutralize stomach acid and relieve pain. These are over-the-counter medications and don't need to be prescribed. Antacid options include:

- calcium carbonate (Tums)
- magnesium hydroxide (milk of magnesia)
- calcium carbonate and magnesium hydroxide (Rolaids)

Antacids can prevent your body from absorbing other medications, so it's recommended you take antacids at least an hour before other medications to avoid this side effect. However, antacids are recommended for occasional use only. If you are having symptoms of [heartburn](#), indigestion, or gastritis more than twice a week for more than two weeks, see your doctor. They can provide a proper diagnosis along with other medications to treat your condition.

[Shop for antacids online.](#)

Lifestyle changes

Smoking, regularly using alcohol, and taking medications such as aspirin and NSAIDs increases inflammation of the digestive track. Both smoking and [heavy alcohol use](#) (more than five drinks per day) also increase the risk for stomach cancer. Completely [quitting smoking](#) and drinking alcohol is often recommended. Stopping the use of pain relievers such as aspirin, naproxen, and ibuprofen may also be necessary if those medications are the cause.

If you have a diagnosis of [celiac disease](#), you'll need to remove gluten from your diet.

When should you call your doctor?

Make an appointment with your doctor if your symptoms don't go away within two weeks of treatment.

Call your doctor immediately if:

- you have a fever of 100.4°F (38°C) or higher
- your vomit looks like used coffee grounds
- your stools are black or tarry
- you have severe abdominal pain

Untreated cases of gastritis and duodenitis can become [chronic](#). This can lead to [stomach ulcers](#) and [stomach bleeding](#). In some cases, chronic inflammation of your stomach lining can change the cells over time and increase your risk for developing [stomach cancer](#).

Talk to your doctor if your gastritis or duodenitis symptoms occur more than twice a week. They can help determine the cause and get you the treatment you need.

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