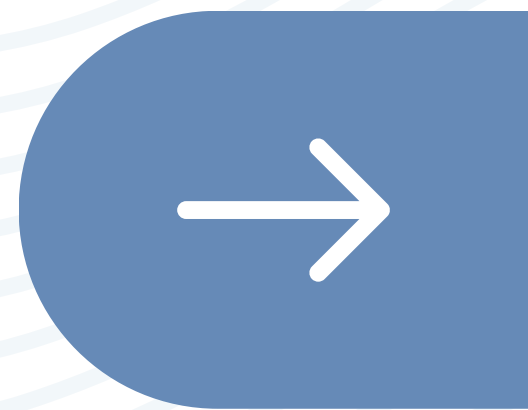




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PANCREAS DIVISUM





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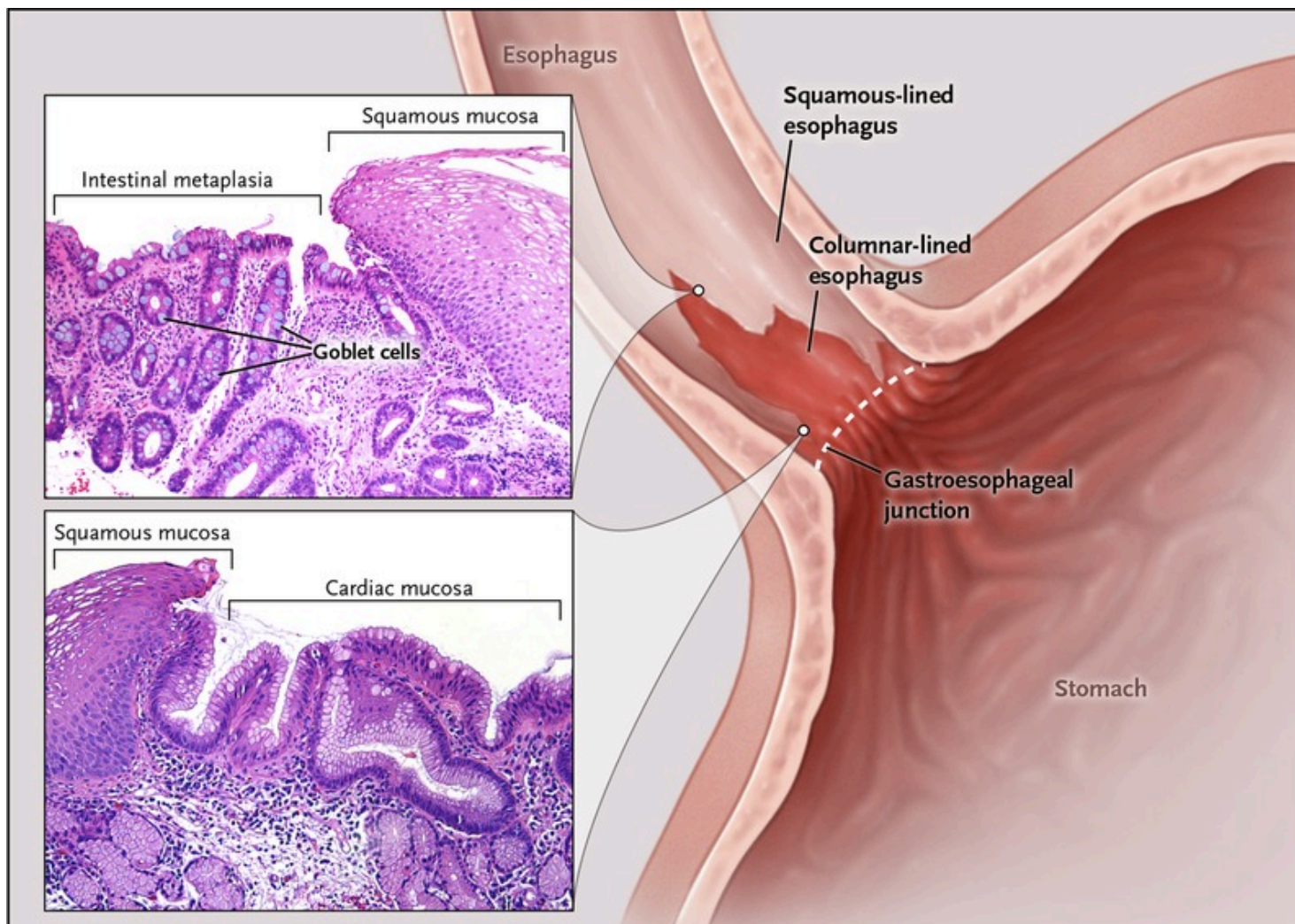
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PANCREAS DIVISUM

Barrett's esophagus results from chronic gastroesophageal reflux disease (GERD), causing the normal squamous epithelium of the lower esophagus to be replaced by metaplastic columnar epithelium.



VISUAL REPRESENTATION





RISK FACTORS:

- ***Chronic GERD: Persistent acid reflux is a major contributing factor.***
- ***Age and Gender: More prevalent in older adults, particularly white males.***



CLINICAL SIGNIFICANCE:

- ***Barrett's esophagus increases the risk of developing esophageal adenocarcinoma.***



DIAGNOSIS:

Endoscopy with Biopsy: Definitive diagnosis involves endoscopic examination, with biopsies confirming the presence of metaplastic cells.



TREATMENT:

- ***GERD Management: Proton pump inhibitors (PPIs) are commonly prescribed to control acid reflux.***
- ***Endoscopic Ablation: Techniques like radiofrequency ablation may be used to remove abnormal tissue.***
- ***Surgical Resection: In some cases, surgical removal of affected portions may be considered.***



MCQ

Question:

Which histological type of esophageal carcinoma is commonly associated with smoking and alcohol consumption?

- A) Adenocarcinoma
- B) Squamous cell carcinoma
- C) Neuroendocrine carcinoma
- D) Small cell carcinoma

Answer: B) Squamous cell carcinoma