University of Cincinnati

Department of Emergency Medicine

Dyspepsia (Indigestion) Discharge Instructions

You have dyspepsia (indigestion). This may be due to a number of causes including peptic ulcer disease, diet, smoking or alcohol, or an infection.

Diet and Lifestyle

People with dyspepsia should eat a healthy balanced diet.

It does not help to eat more often or increase the amount of milk and dairy products you consume. These changes may even cause more stomach acid.

Avoid foods and drinks that cause discomfort for you. For many people these include alcohol, coffee, caffeinated soda, fatty foods, chocolate, and spicy foods.

Avoid eating late night snacks.

Other things you can do to ease your symptoms and help healing include:

If you smoke or chew tobacco, try to quit. Tobacco will slow the healing of stomach. Talk to your doctor about getting help to quit using tobacco

Try to reduce your stress level and learn ways to better manage stress.

Avoid drugs such as ibuprofen (Advil, Motrin), or naproxen (Aleve, Naprosyn). Take acetaminophen (Tylenol), as directed on the bottle, to relieve aches and pain. Take all medicines with plenty of water.

Medicines

Most patients with dyspepsia are started on a trial of a proton pump inhibitor - a medication which suppresses acid production in your stomach. Taking antacids (such as Rolaids or Tums) as needed between meals, and then at bedtime, may help healing also. Ask your doctor about taking these medicines.

If you are taking aspirin, do NOT stop taking an aspirin without talking to your doctor. Talk to your doctor about your medicine choices if your pain was caused by aspirin, as you may need to switch to enteric coated aspirin.

Follow Up

You need follow up with a Primary Care Physician in 4-8 weeks. We recommend that you discuss testing for H. pylori with this physician.

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Helicobacter pylori

H pylori is a bacteria that can cause infections in the stomach and small bowel that is very often the cause of GI distress. It is very strongly associated with peptic ulcer disease and is quite common across the world with up to 50% of adults on the

planet being infected. Testing available includes breath testing and stool testing. If the testing is positive, there are several treatment options available via a short course of antibiotics. Your physician may possibly even recommend endoscopy (passing a camera to our stomach to look for signs of infection) based on your symptoms.

When to call the doctor

Get medical help right away if you:

Develop severe or new/worse abdominal pain

Have light headedness, such as fainting or confusion, or excessive sweating,

Vomit blood

See blood in your stool (maroon, dark, or tarry black stools)

Call your doctor if:

You feel dizzy or light-headed

You feel full after eating a small meal portion

You experience unintentional weight loss greater than 5-10 pounds.

You are vomiting and unable to keep down food or water

You lose your appetite

References

- Adapted from U.S. National Library of Medicine Peptic Ulcer Disease Discharge Guidelines
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- Lanza FL, Chan FK, Quigley EM: Practice Parameters Committee of the American College of Gastroenterology. Guidelines for prevention of NSAID-related ulcer complications. Am J Gastroenterol. 2009;104:728-738.
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