

# Dyspepsia and gastro-oesophageal reflux disease overview

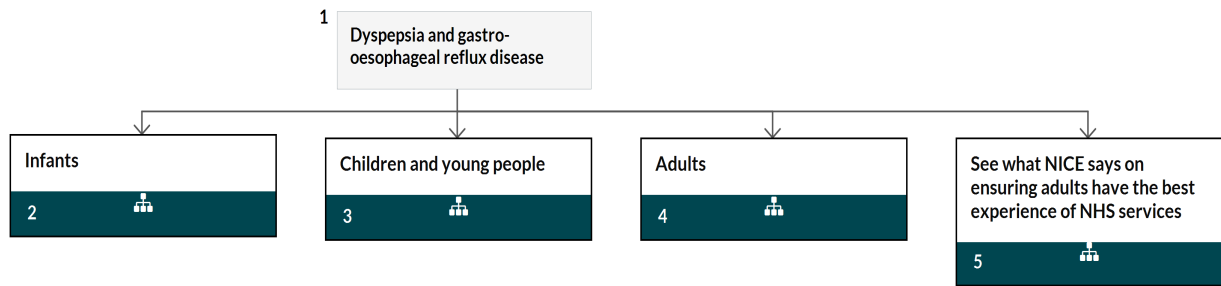
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/dyspepsia-and-gastro-oesophageal-reflux-disease>

NICE Pathway last updated: 21 October 2019

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



## 1 Dyspepsia and gastro-oesophageal reflux disease

No additional information

## 2 Infants

[See Dyspepsia and gastro-oesophageal reflux disease / Managing gastro-oesophageal reflux and reflux disease in infants](#)

## 3 Children and young people

[See Dyspepsia and gastro-oesophageal reflux disease / Managing gastro-oesophageal reflux and reflux disease in children and young people](#)

## 4 Adults

[See Dyspepsia and gastro-oesophageal reflux disease / Dyspepsia and gastro-oesophageal reflux disease in adults](#)

## 5 See what NICE says on ensuring adults have the best experience of NHS services

[See Patient experience in adult NHS services](#)

Symptoms and signs	Possible diagnostic implications	Suggested actions
<b>Gastrointestinal</b>		
Frequent, forceful (projectile) vomiting	May suggest hypertrophic pyloric stenosis in infants up to 2 months old	Paediatric surgery referral
Bile-stained (green or yellow-green) vomit	May suggest intestinal obstruction	Paediatric surgery referral
Haematemesis (blood in vomit) with the exception of swallowed blood, for example, following a nose bleed or ingested blood from a cracked nipple in some breast-fed infants	May suggest an important and potentially serious bleed from the oesophagus, stomach or upper gut	Specialist referral
Onset of regurgitation and/or vomiting after 6 months old or persisting after 1 year old	Late onset suggests a cause other than reflux, for example a urinary tract infection (also see what NICE says on <a href="#">urinary tract infections</a> )  Persistence suggests an alternative diagnosis	Urine microbiology investigation  Specialist referral
Blood in stool	May suggest a variety of conditions, including bacterial gastroenteritis, infant cows' milk protein allergy (also see what NICE says on <a href="#">food allergy in under 19s</a> ) or an acute surgical condition	Stool microbiology investigation  Specialist referral

Abdominal distension, tenderness or palpable mass	May suggest intestinal obstruction or another acute surgical condition	Paediatric surgery referral
Chronic diarrhoea	May suggest cows' milk protein allergy (also see what NICE says on <a href="#">food allergy in under 19s</a> )	Specialist referral
<b>Systemic</b>		
Appearing unwell  Fever	May suggest infection (also see what NICE says on <a href="#">fever in under 5s</a> )	Clinical assessment and urine microbiology investigation  Specialist referral
Dysuria	May suggest urinary tract infection (also see what NICE says on <a href="#">urinary tract infections</a> )	Clinical assessment and urine microbiology investigation  Specialist referral
Bulging fontanelle	May suggest raised intracranial pressure, for example, due to meningitis (also see what NICE says on <a href="#">bacterial meningitis and meningococcal septicaemia in under 16s</a> )	Specialist referral

<p>Rapidly increasing head circumference (more than 1 cm per week)</p> <p>Persistent morning headache, and vomiting worse in the morning</p>	<p>May suggest raised intracranial pressure, for example, due to hydrocephalus or a brain tumour</p>	<p>Specialist referral</p>
<p>Altered responsiveness, for example, lethargy or irritability</p>	<p>May suggest an illness such as meningitis (also see what NICE says on <a href="#">bacterial meningitis and meningococcal septicaemia in under 16s</a>)</p>	<p>Specialist referral</p>
<p>Infants and children with, or at high risk of, atopy</p>	<p>May suggest cows' milk protein allergy (also see what NICE says on <a href="#">food allergy in under 19s</a>)</p>	<p>Specialist referral</p>

## H. pylori

*Helicobacter pylori*

## H2RA

H<sub>2</sub> receptor antagonist

## H2RAs

H<sub>2</sub> receptor antagonists

## NSAID

non-steroidal anti-inflammatory drug

## NSAIDs

non-steroidal anti-inflammatory drugs

**PPIs**

proton pump inhibitors

**PPI**

proton pump inhibitor

**Your responsibility****Guidelines**

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

**Technology appraisals**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health

professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Medical technologies guidance, diagnostics guidance and interventional procedures guidance**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.