

# Gastrointestinal Hemorrhage, Lower

## What is a lower gastrointestinal hemorrhage?

A lower gastrointestinal (GI) hemorrhage, also called lower GI bleeding or rectal bleeding, is abnormal blood loss from the colon, rectum, or anus (the opening of the rectum). It is usually seen as blood on or in a bowel movement, on the toilet tissue after wiping, or in the toilet bowl water. The blood may be easily seen or it may be hidden, requiring testing of the bowel movements to know it is there. Common causes include tears in the skin of the anus or hemorrhoids. Bleeding may also be from small pockets that form in weak parts of the colon wall and stick out. These pockets or pouches can bleed and may not stop bleeding on their own. Other possible causes of rectal bleeding include infections of the intestine, inflammatory bowel disease, colon cancer, or bleeding in the upper digestive system.

## What can I expect in the hospital?

Several things may be done while you are in the hospital to monitor, test, and treat your condition. They include:

### Monitoring

- You will be checked often by the hospital staff.
- Your heart rate, blood pressure, and temperature will be checked regularly.
- A heart (cardiac) monitor may be used to keep track of your heartbeat.
- Your blood oxygen level will be monitored by a sensor that is attached to your finger or earlobe.

### Testing

Testing may include:

- Blood tests to check for infections or blood loss
- Tests of bowel movements to check for blood
- Rectal exam: A test in which your provider will gently put a lubricated, gloved finger in your rectum and may place the other hand on your abdomen to feel and check the size and shape of your organs. Your provider will also look for anal fissures or external hemorrhoids.
- Anoscopy: A small, lighted tube is put into your rectum a few inches to look for internal hemorrhoids or other causes of bleeding
- Sigmoidoscopy or colonoscopy: A test in which a long, flexible tube and tiny camera is put into your rectum and up into the colon to look for causes of the bleeding. Sometimes one or more pieces of tissue are removed to help make a diagnosis. This is called a biopsy.
- Computed tomography (CT) scan: A series of X-rays taken from different angles and arranged by a computer to show thin cross sections of the colon

- **Angiography:** A series of X-rays taken after your healthcare provider injects a special dye into your blood vessels to look for areas where the dye may be leaking out of a blood vessel or blocked blood vessels
- **Radionuclide scan:** A series of pictures taken with a scanning camera after a small amount of radioactive material is injected into your vein to check for abnormalities of your organs or areas of bleeding

## **Treatment**

The treatment for rectal bleeding depends on its cause, your symptoms, your overall health, and any complications you may have.

- You will have a small tube (IV catheter) inserted into a vein in your hand or arm. This will allow for medicine to be given directly into your blood and to give you fluids, if needed.
- If you have lost a lot of blood, you may need a blood transfusion.
- Your provider may prescribe medicine to:
  - Treat GI irritation
  - Stop bleeding
  - Treat or prevent an infection
  - Replace iron lost from bleeding
  - Prevent constipation
- You may need surgery to treat GI bleeding. Surgery may include:
  - **Colon resection:** Surgery to remove the section of colon that contains the area that is bleeding. The ends of the intestine are then sewn back together
  - **Colostomy:** Surgery to remove a large section of your colon. The healthy part of the remaining colon is attached to an opening in the wall of your abdomen. Bowel movements then pass through this opening instead of through the rectum. They are collected in a bag outside the body. After the remaining colon heals, the colostomy can sometimes be reversed. This means that you will have a second surgery to rejoin the ends of the colon to each other and will no longer have a colostomy.
  - **Hemorrhoidectomy:** Surgery to remove hemorrhoids causing lower GI bleeding. This may be done by removing hemorrhoid tissue or by cutting off blood supply to the hemorrhoids with rubber bands or staples or injecting medicine into the hemorrhoid
- Depending on the cause and amount of bleeding, you may not be allowed to eat or drink until the bleeding has been stopped.

## **What can I do to help?**

- You will need to tell your healthcare team if you have new or worsening:
  - Bowel movement with bright red blood
  - Bright red blood in your vomit or vomit that looks like coffee grounds
  - Fainting
  - Abdominal bloating

- Abdominal cramps or pain
- Black, tarry bowel movements
- Change in bowel habits, such as pain, mucus, diarrhea, constipation, or other intestinal problems
- Tiredness
- Signs of infection around your surgical wound if you had surgery. These include:
  - The area around your wound is more red or painful
  - Your wound area is very warm to touch
  - You have blood, pus, or other fluid coming from the wound area
  - You have chills or muscle aches
- Ask questions about any medicine or treatment or information that you do not understand.

## **How long will I be in the hospital?**

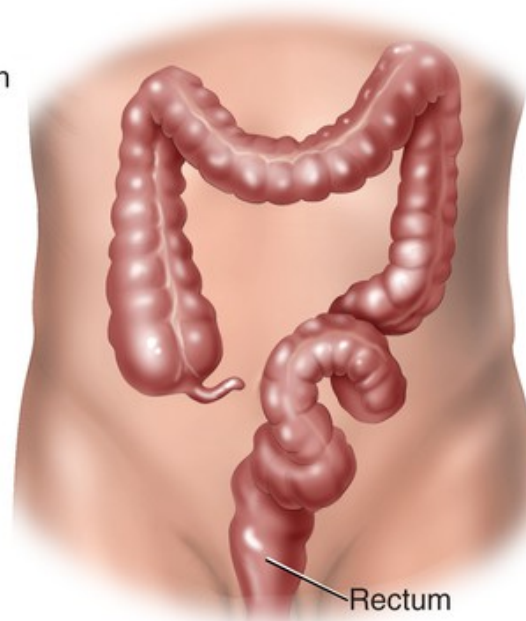
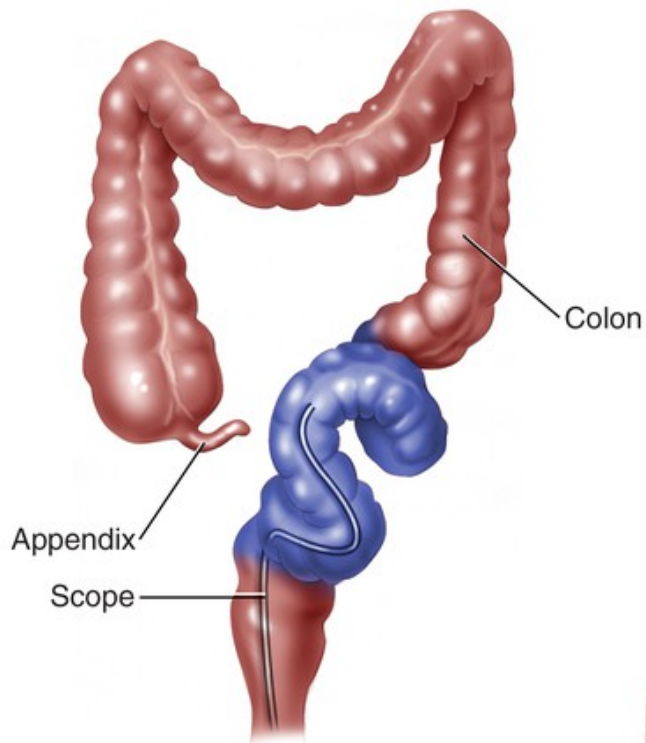
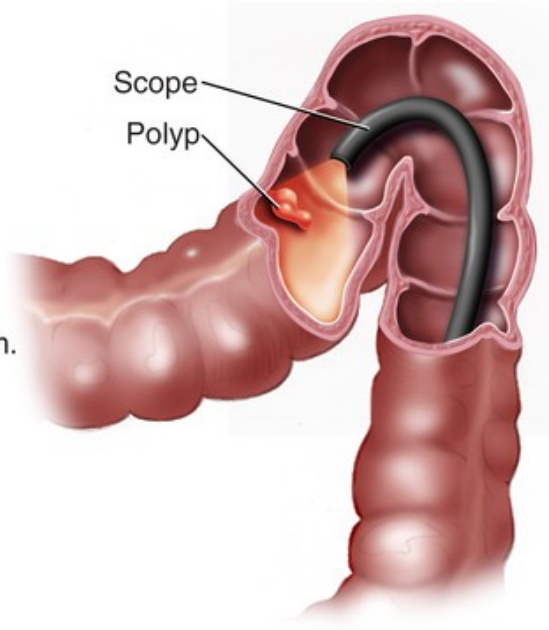
How long you stay in the hospital depends on many factors. The average amount of time to stay in the hospital with lower GI bleeding is 3 to 5 days.

Developed by RelayHealth.

*This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.*

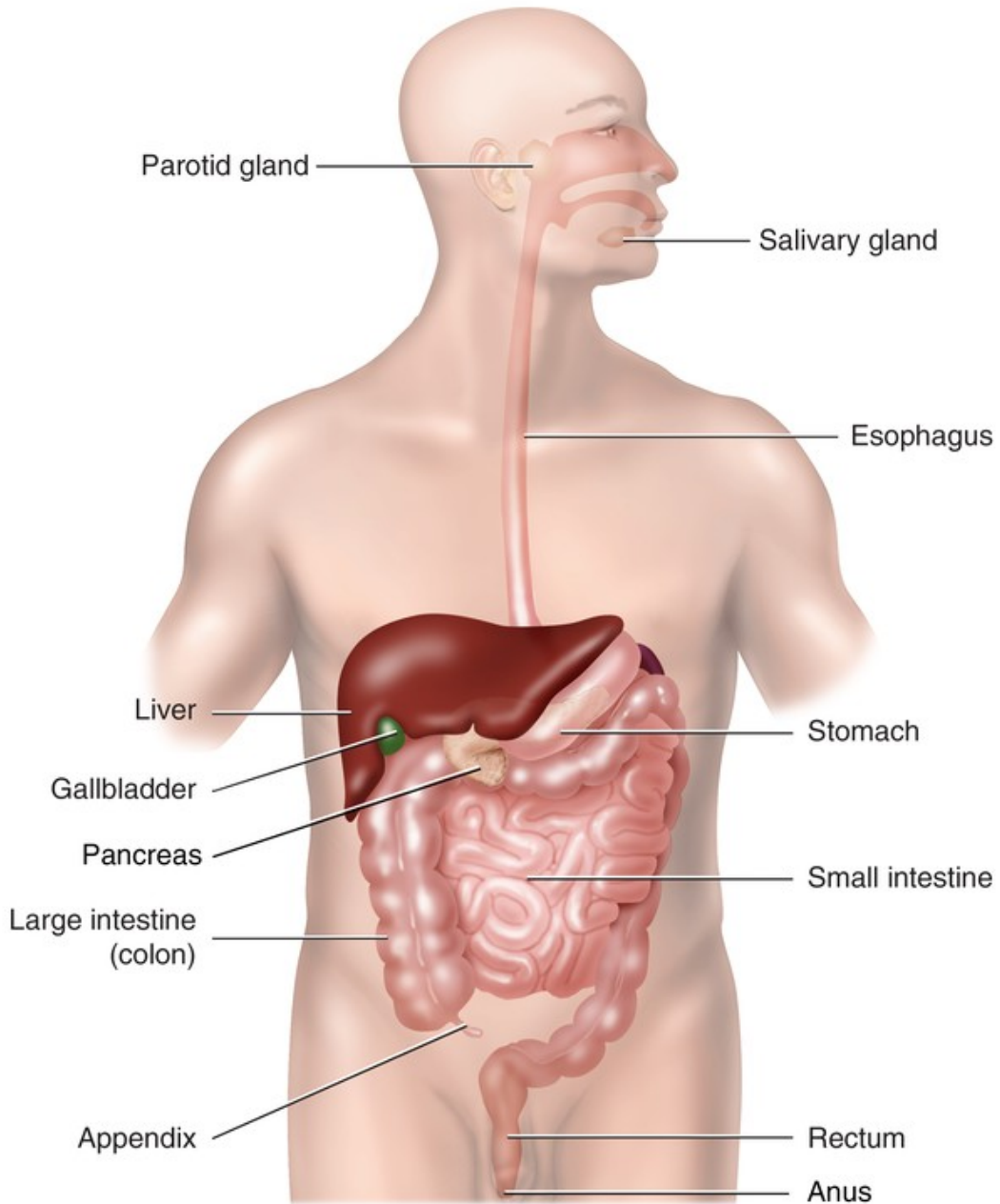
# Colonoscopy and Sigmoidoscopy

The sigmoid colon is the last part of the colon (shown in blue). A sigmoidoscopy checks this part of the colon and the rectum. A colonoscopy checks all of the colon all the way to the appendix.



Copyright ©2014 McKesson Corporation and/or one of its subsidiaries. All rights reserved.

# Digestive System



Copyright ©2014 McKesson Corporation and/or one of its subsidiaries. All rights reserved.