



## Peptic Ulcers

JAMA. 2001;286(16):2052 (doi:10.1001/jama.286.16.2052)

Online article and related content  
current as of November 27, 2009.

Supplementary material

Key Words

<http://jama.ama-assn.org/cgi/content/full/286/16/2052/DC1>

Correction

[Contact me if this article is corrected.](#)

Citations

[Contact me when this article is cited.](#)

Topic collections

JAMA Patient Page; Gastroenterology; Gastrointestinal Diseases  
[Contact me when new articles are published in these topic areas.](#)

Related Articles published in  
the same issue

Process of Care and Outcomes for Elderly Patients Hospitalized With  
Peptic Ulcer Disease: Results From a Quality Improvement Project  
[Jane Brock et al. JAMA. 2001;286\(16\):1985.](#)

Subscribe

<http://jama.com/subscribe>

Email Alerts

<http://jamaarchives.com/alerts>

Permissions

[permissions@ama-assn.org](mailto:permissions@ama-assn.org)

<http://pubs.ama-assn.org/misc/permissions.dtl>

Reprints/E-prints

[reprints@ama-assn.org](mailto:reprints@ama-assn.org)

# Peptic Ulcers

A **peptic ulcer** is a sore or hole in the lining of the gastrointestinal tract that usually occurs in the stomach or the **duodenum**, the first section of the small intestine. One in 10 Americans will develop an ulcer in his or her lifetime.

Contrary to popular belief, ulcers are not caused by spicy foods or stress but rather are aggravated by them. Ulcers appear when the protective lining (**mucosa, submucosa**) of the gastrointestinal tract is eroded. Most of the time, this is caused by infection with a bacterium called ***Helicobacter pylori***. Most ulcers can be treated with medications, often including antibiotics. In some cases, surgery is required for treatment. Ask your physician how to best treat your ulcer. The October 24/31, 2001, issue of *JAMA* includes an article about treatment of peptic ulcer disease.

## SYMPTOMS

There are several indications that you may have an ulcer. Check with your physician if you have any of these symptoms:

- Burning or gnawing pain between the bottom of the breastbone and the navel that improves after eating but returns a few hours later or in the middle of the night
- A change in appetite with weight gain or weight loss
- Nausea or vomiting
- Frequent burping or bloating

If you have any of the following symptoms, contact your physician immediately. They could be signs of a more serious condition:

- Sharp, sudden, persistent stomach pain
- Bloody or black stools
- Bloody vomit or vomit that looks like coffee grounds

## RISK FACTORS FOR ULCERS

- ***Helicobacter pylori* infection**—The exact source of *Helicobacter pylori* is not known, but it may be transmitted by person-to-person contact. Be sure to always wash your hands after using the bathroom and before eating.
- **Over-the-counter pain medications** such as aspirin or ibuprofen—Frequent use of these medications can block the production of certain substances that protect the stomach lining. If you have an ulcer, limit or eliminate use of these kinds of drugs.
- **Alcohol consumption**—Alcohol irritates the stomach lining and increases stomach acid output.
- **Smoking**—Smoking increases the volume and concentration of acid secreted by the stomach. If you have an ulcer, quit smoking.
- **Family history of ulcers**—People with family members with ulcers are more susceptible to getting them; the reason for this is not known.

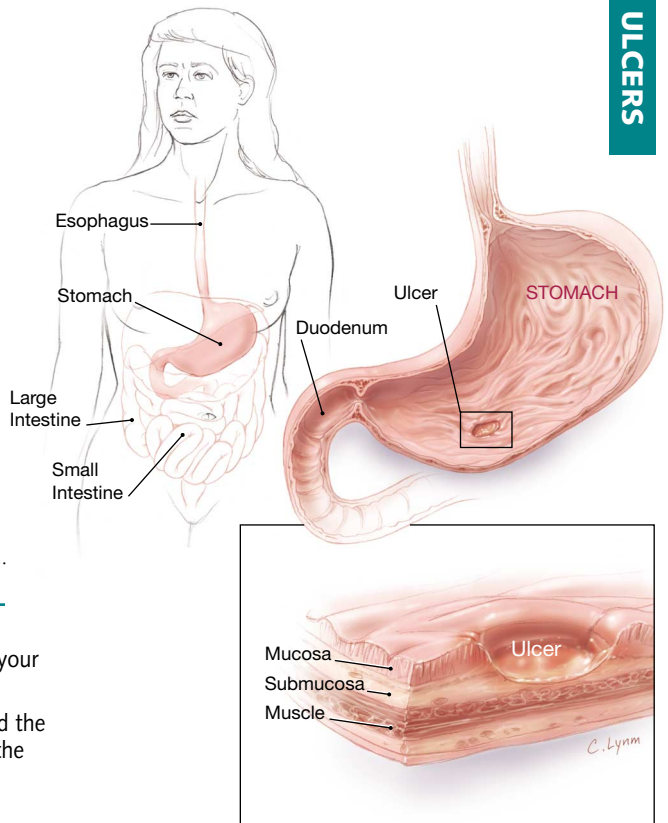
Sources: American College of Gastroenterology, The AMA Encyclopedia of Medicine, The AMA Family Medical Guide, Centers for Disease Control and Prevention, National Institutes of Health

Lise M. Stevens, MA, Writer

Cassio Lynn, MA, Illustrator

Richard M. Glass, MD, Editor

The JAMA Patient Page is a public service of JAMA. The information and recommendations appearing on this page are appropriate in most instances, but they are not a substitute for medical diagnosis. For specific information concerning your personal medical condition, JAMA suggests that you consult your physician. This page may be reproduced noncommercially by physicians and other health care professionals to share with patients. Any other reproduction is subject to AMA approval. To purchase bulk reprints, call 718/946-7424.



## FOR MORE INFORMATION

- American College of Gastroenterology  
703/820-7400  
[www.acg.gi.org](http://www.acg.gi.org)
- National Center for Infectious Diseases/Centers for Disease Control and Prevention  
888/698-5237  
[www.cdc.gov/ulcer](http://www.cdc.gov/ulcer)
- National Digestive Diseases Information Clearing House  
800/891-5389  
[www.niddk.nih.gov](http://www.niddk.nih.gov)

## INFORM YOURSELF

To find this and previous JAMA Patient Pages, go to the Patient Page Index on JAMA's Web site at [www.jama.com](http://www.jama.com). A JAMA Patient Page on gastroesophageal reflux disease was published on May 9, 2001.

