## **Task #2**

1. What disease can be assumed in the patient?

2. What symptoms and history confirm this diagnosis?

3. What other symptoms and syndromes are specific for this disease?

4. Recommend the methods for examination of patient and justify their value.

5. What are the ways of treatment of the disease?

**A.** Patient K., 32 years old, was brought to the hospital in the syncopal state. On admission he complained of weakness, dizziness, chest pain, palpitations, vomiting with release of dark brown vomit. In the past, these states was not observed. The survey found that within 1 year of he was suffering from heartburn occurring in 20-30 minutes after meals, mostly salty and spicy. Occasional heartburn bothered at night. The patients complained of persistent constipation.

**B.** Patient N., 24 years old, was admitted to the hospital with complaints of epigastric pain occurring in 1.5-2 hours after meals mainly in the evening, and sometimes at night, heartburn, sour taste in the mouth, constipation. The pain is increased when taking spicy, salty, acidic foods and decreased – after drinking soda. The patient was ill for about a year, the condition worsened in the autumn.

C. Patient V., aged 48, complained of general weakness, malaise, the loss of appetite, burning sensation on the tip of the tongue, feeling of heaviness in the epigastric even after eating small amounts of food, and diarrhea. He considered himself to be ill for 5-6 years, but in practice was not treated. The examination: should that the patient had malnutrition, a pale skin, the stomach when palpating was soft, moderately painful in the epigastric region. Otherwise, date of the physical examination was normal. Complete blood count: erythrocytes  $2.6*10^{12}$ /l, Hb 94 g/l, colour index 1.2, ESR 18 mm/hr, the basal and stimulated gastric juice acidity was below the norm.