



**XVII. Diseases of the Digestive System**

<b>Bacillary Dysentery</b>	<b>III-4, 3. 4112</b>		
			
<b>A piece of large intestine:</b>			
	<b>Mucosa:</b>	<ul style="list-style-type: none"> <li>• Swollen</li> <li>• Inflamed and congested</li> <li>• Irregularly-haemorrhagic</li> </ul>	
		<ul style="list-style-type: none"> <li>• Shows:</li> </ul>	<ul style="list-style-type: none"> <li>• Excess of mucus</li> <li>• Scattered ulcerations</li> <li>• Dull greyish-yellowish patches</li> </ul>
	<b>Rugae:</b>	<ul style="list-style-type: none"> <li>• Oedematous</li> <li>• With scattered exudate</li> </ul>	
	<b>Ulcers:</b>	<ul style="list-style-type: none"> <li>• Appear in the parts not coated with membranes</li> <li>• Are numerous</li> <li>• Irregular in shape and size</li> <li>• Chiefly superficial (not deep)</li> <li>• Sharp edges (and not undermined)</li> <li>• Slightly red hyperaemic inflamed margins</li> <li>• Granular</li> </ul>	
	<b>Membranous coating:</b>	<ul style="list-style-type: none"> <li>• Necrotic</li> <li>• Granular</li> <li>• Incomplete</li> <li>• Detached in parts</li> <li>• Dull greyish-yellowish</li> </ul>	
			

## CAUSES OF DYSENTERY



DRINKING LOCAL  
TAP WATER



COCKROACHES  
& PARASITES



ICE CUBES  
IN DRINKS



ICE CREAM &  
UNPASTEURISED MILK

### **N.B.1:**

#### **Sites of lesions in bacillary dysentery (caused by Shiga dysentery bacilli):**

1. The colon and particularly its distal part (commonest).
2. Caecum.
3. The lower part of the ileum (occasional).

#### **Main lesions:**

1. Acute colitis

With:

- a. *Hyperemia of mucosa.*
- b. *Oedema of wall.*
- c. *Enlarged lymph follicles.*

2. Formation of a dirty greyish or yellowish pseudo-membrane

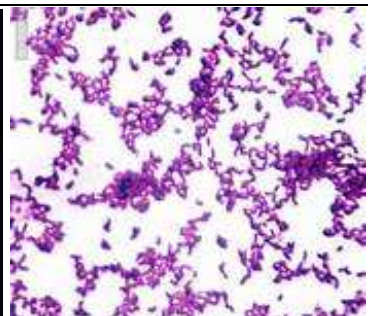
With:

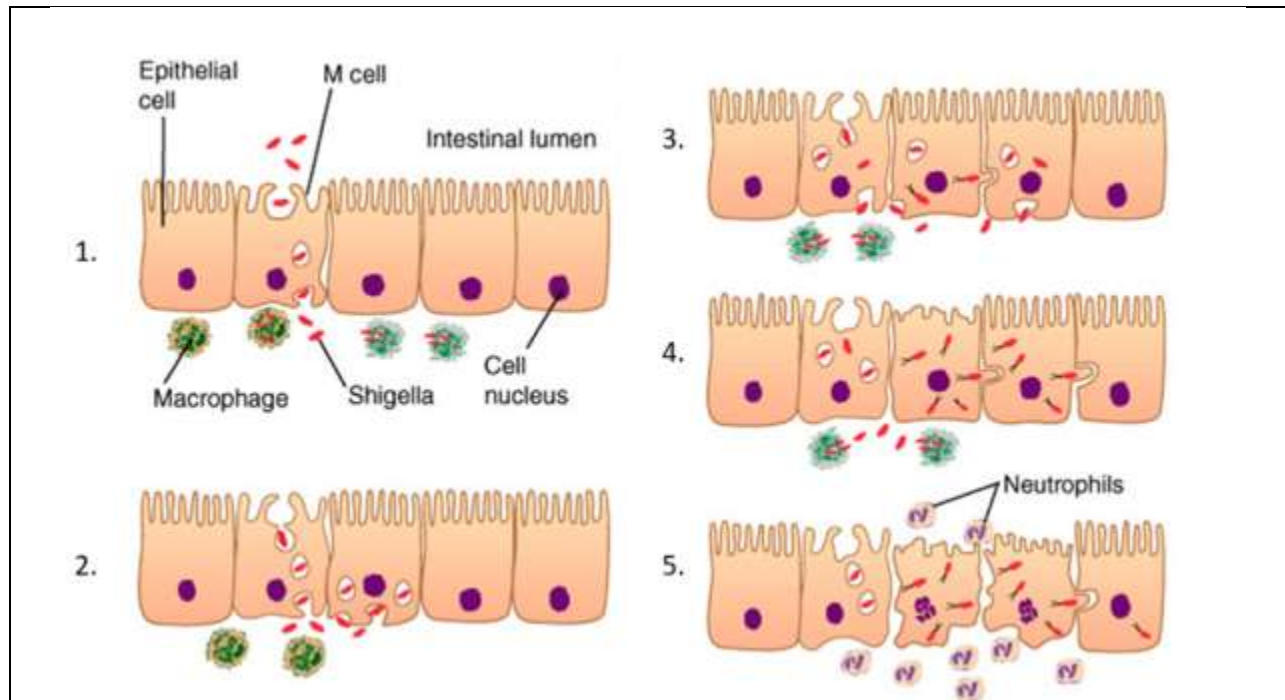
- a. *Necrosis of surface-layers.*
- b. *Desquamation.*
- c. *Fibrinopurulent exudate covering the mucosa.*

3. Friability and softness of the mucosa so that ulceration occurs by sloughing of the necrotic patches.

- **The ulcers are usually**

- *Numerous,*
- *Discrete,*
- *Shallow,*
- *Irregular,*
- *Ragged and*
- *Variable in size and shape –*
- The *mucosa in between the ulcers is congested and diffusely oedematous.*
- Sometimes, few ulcers coalesce together producing **large irregular confluent ulcers.**
- In long-standing cases (chronic), the ulcers may become deep.
- **No (or very little) tendency to perforation, stenosis or fistula formation.**





**N.B.2:**

- Unlike typhoid fever, there is usually **no tendency for bacteremia** spread of the dysentery bacilli which **remain localized to the intestinal tract**.
- **The systemic changes**
  - *Abdominal cramps,*
  - *Pain,*
  - *Vomiting,*
  - *Tenesmus,*
  - *Diarrhoea,*
  - *Mucinous bloody stools and*
  - *Dehydration*
- Are supposed to be due to the **absorption of the liberated endotoxins**.

