



PHARMACOLEARN

It's Important to Know!

BP204T — Pathophysiology

B.Pharm Semester 2 · Unit 4 — Inflammatory Bowel, Hepatic, Bone and Joint Diseases

Unit IV: Inflammatory Bowel, Hepatic, Bone and Joint Diseases

Inflammatory bowel disease

Inflammatory bowel disease involves chronic immune-mediated inflammation of the gastrointestinal tract. Crohn disease and ulcerative colitis differ in distribution and depth of involvement. Complications can include bleeding, obstruction, fistula, malnutrition or toxic dilation.

Jaundice and hepatitis

Jaundice is yellow discoloration caused by increased bilirubin. It can be prehepatic, hepatic or posthepatic depending on where bilirubin handling is disturbed. Hepatitis is inflammation of the liver and can be caused by viruses, alcohol, medicines, immune mechanisms or other injury.

Bone and joint disease

Rheumatoid arthritis is an immune-mediated inflammatory joint disease that can damage synovium and cartilage. Gout involves deposition of monosodium urate crystals when urate is elevated. Osteoporosis is primarily a reduction in bone strength rather than an inflammatory joint disease.

Unit IV: Frequently asked questions

Q: What is jaundice?

A: Jaundice is yellow discoloration caused by increased bilirubin in tissues and body fluids.

Q: What is the difference between rheumatoid arthritis and gout?

A: Rheumatoid arthritis is immune-mediated joint inflammation, while gout is crystal-induced inflammation caused by urate deposition.

Q: What is inflammatory bowel disease?

A: It is chronic immune-mediated inflammation of the gastrointestinal tract, including Crohn disease and ulcerative colitis.

Q: What is osteoporosis?

A: It is reduced bone strength due to loss of bone mass and structural deterioration, increasing fracture risk.

Unit IV: Key takeaways

- Hepatic disease can impair bilirubin handling and produce jaundice.
- Inflammatory bowel disease is chronic immune-mediated intestinal inflammation.
- Jaundice can result from prehepatic, hepatic or posthepatic disturbance.
- Rheumatoid arthritis, gout and osteoporosis have different mechanisms.
- Inflammatory bowel disease, hepatic disease and joint disease have different mechanisms and complications.

Unit IV: Clinical correlation

Clinical correlation: jaundice. Bilirubin pattern, liver enzymes and clinical history help distinguish production, hepatocellular and obstructive causes.