

# Exploring the frontiers of gastroenterology within general internal medicine.

Ellen Grines\*

Department of Gastroenterology, Second Affiliated Hospital of Hainan Medical University, Haikou, Hainan, China

## Abstract

**General Internal Medicine and Gastroenterology are two medical specialties that are closely related. General Internal Medicine focuses on the prevention, diagnosis, and treatment of adult diseases, while Gastroenterology is a subspecialty that focuses on the digestive system and related organs. In this article, we will explore the frontiers of Gastroenterology within the realm of General Internal Medicine.**

**Keywords:** General Internal Medicine, Gastroenterology, Adult diseases.

## Introduction

General Internal Medicine and Gastroenterology are two branches of medicine that are closely related, yet distinct from one another. While General Internal Medicine deals with the diagnosis and treatment of adult diseases, Gastroenterology is a subspecialty of Internal Medicine that specifically focuses on the digestive system and its disorders. In this article, we will explore the frontiers of Gastroenterology within General Internal Medicine and how the two fields intersect [1].

Despite being widespread throughout the world, gastrointestinal and liver illnesses receive insufficient support for study and care. The rectum, pancreas, liver, small bowel, colon, oesophagus, and small and large bowels are all included in the extensive field of gastroenterology. Endoscopy, physiological assessments, biomarkers, and prophylactic measures are just a few of the cutting-edge diagnostic and treatment choices that gastroenterologists provide their patients [2].

Gastroenterology, as a subspecialty, plays a critical role in the diagnosis and management of various digestive system diseases, including but not limited to peptic ulcer disease, gastroesophageal reflux disease, liver disease, inflammatory bowel disease, and pancreatitis. Gastroenterologists use a combination of clinical evaluation, endoscopic techniques, and laboratory tests to diagnose these conditions. In addition, they also perform a range of therapeutic procedures, such as colonoscopy, endoscopic retrograde cholangiopancreatography, and endoscopic ultrasound, to manage digestive system disorders [3].

One of the frontiers of Gastroenterology is the application of technology and advancements in diagnostic methods. For example, the development of wireless capsule endoscopy has revolutionized the way we evaluate the small intestine, allowing physicians to diagnose previously difficult to detect

conditions. Another area of interest is the study of the gut-brain axis, which highlights the close relationship between the digestive system and the central nervous system. General Internal Medicine, on the other hand, provides a broad and comprehensive approach to patient care, addressing both acute and chronic illnesses. Internists focus on the overall health of their patients, rather than just treating individual symptoms or diseases. This means that they work closely with specialists, including gastroenterologists, to provide a complete and integrated approach to patient care [4].

The intersection between General Internal Medicine and Gastroenterology is evident in the management of patients with chronic digestive system diseases. For instance, patients with Inflammatory Bowel Disease (IBD) require close coordination between their primary care physician and their gastroenterologist. The primary care physician provides overall management and monitoring of the patient's health, while the gastroenterologist focuses on the specific needs of the digestive system [5].

## Conclusion

In conclusion, General Internal Medicine and Gastroenterology play complementary roles in the diagnosis and treatment of digestive system diseases. The intersection between the two fields provides a comprehensive and integrated approach to patient care, allowing physicians to address the full spectrum of their patients' health needs. As technology and advancements continue to shape the field of medicine, the frontier of Gastroenterology within General Internal Medicine is sure to evolve and grow.

## References

1. Hedrick SC, Chaney EF, Felker F, et al. Effectiveness of collaborative care depression treatment in VA primary care. *J Gen Intern Med.* 2003;18:9-16.

---

\*Correspondence to: Ching Fang, Department of Immunology and Rheumatology, Chung Shan Medical University, Taichung, Taiwan, E-mail: Ellen.grines@qq.com

Received: 29-Dec-2022, Manuscript No. AAAGIM-23-89105; Editor assigned: 02-Jan-2022, PreQC No. AAAGIM-23-89105(PQ); Reviewed: 16-Jan-2023, QC No. AAAGIM-23-89105;

Revised: 23-Jan-2023, Manuscript No. AAAGIM-23-89105(R); Published: 30-Jan-2023, DOI: 10.35841/aaagim-7.1.164

---

2. Auerbach AD, Wachter RM, Katz P, et al. Implementation of a voluntary hospitalist service at a community teaching hospital: Improved clinical efficiency and patient outcomes. *Ann Intern Med.* 2002;137:859-65.
3. Melzer D, Manning WG, Morrison J, et al. Effects of physician experience on costs and outcomes on an academic general medicine service: Results of a trial of hospitalists. *Ann Intern Med.* 2002;137:866-74.
4. Kitahata MM, Koepsell TD, Deyo RA, et al. Physicians experience with the acquired immunodeficiency syndrome as a factor in patients survival. *N Engl J Med.* 1996;334:701-6.
5. Indridason OS, Coffman CJ, Oddone EZ. Is specialty care associated with improved survival of patients with congestive heart failure? *Am Heart J.* 2003;145:300-9.