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Anatomy digestive system study guide

It can be scary to experience unusual stomach and digestive system problems. While you expect to see your doctor, or if you are working with your doctor on a treatment plan, it may be helpful to educate yourself about how your digestive system actually works. 1 StA-gur Karlsson/E+/Getty Images You'll find that you may be able to alleviate some of the anxiety that goes along with not feeling well, having a good understanding of what your digestive system looks like inside. Viewing pictures of a tractor with a geographical indication will help you to find out exactly where you might experience symptoms such as abdominal pain. This understanding will also help you better describe your symptoms to your doctor. Here you will find pictures of the primary organs in your digestive system. They can bring back memories of a high school biology class and they will definitely help you with a more educated patient. If you experience unusual and continuous digestive system symptoms, contact your doctor to get an accurate diagnosis and develop an optimal treatment plan. 2 SEBASTIAN KAULITZKI / SCIENCE PHOTO LIBRARY / Getty Images The process of digestion begins in your mouth when you chew on food. Saliva not only adds moisture to food, but also adds enzymes that start the process of breaking down food components. As you swallow, the food moves into the esophagus, where it moves down to your stomach. In the stomach, the digestive act begins in earnest. In your stomach stores and churns of food you have consumed and releases pepsin and hydrochloric acid, both of which break down food components, resulting in a substance called chyme. After about two to three hours, the comic part of the stomach is removed as it runs along the gastrointestinal tract. 3 OpenStax College/Wikimedia Commons/CC-BY-3.0 The digestive process continues when the stomach hypnos enters the small intestine. The main function of the small intestine is to absorb important nutrients into the bloodstream. The small intestine consists of three parts: the small intestine sed its work on the liver, gallbladder, and pancreas. Duodenal, bile bladder and pancreatic secretions are added to chyme. Jejunum and ileum are responsible for the distribution and absorption of most nutrients, including fats, starches, proteins, vitamins and minerals. 4 PIXOLOGICSTUDIO/SCIENCE PHOTO LIBRARY/Getty Images The liver, gallbladder and pancreas all play an important role in the digestion of food. The liver produces bile, which is then stored in the gallbladder. The bile is then released into the small intestine as needed, where it dissolves fat so that it is absorbed into the body. The pancreas secretes hydrogen carbonate, which neutralizes hydrochloric acid from the stomach, as well as enzymes that break down proteins, carbohydrates and fats. 5 Blausen.com employees (2014). Blausen Medical 2014 Medical Gallery. Wikimedia Commons has media related to Led, I don't know if it's true or not. ISSN 2002-4436./Wikimedia The contents of your small intestine empty your large intestine, which also goes to concepts of bowel or colon. As you can see in the picture, the intestinal contents move from the ascending colon, across the transverse colon and down through a shrinking colon. As the material moves through different parts of the large intestine, water and salt are absorbed by the lining and the material is compressed into the stool. Usually in the stool is carried into the rectum once or twice a day; pressure in this process stimulates the urge to defecate. This process is not quite as simple as indigestion such as irritable bowel syndrome (IBS), where problems with motility, or muscle movement in the large intestine, result in symptoms such as diarrhea and constipation. 6 PIXOLOGICSTUDIO/Getty Images As you look at the above image of your entire digestive system, you now have a better understanding of how food can be digestive and where your digestive organs are located. This knowledge may give you the work of your medical professionals to come up with an optimal treatment plan to deal with your inesane symptoms, whatever they may be. Thanks for the feedback! What are your concerns? Verywell Health uses only high-quality sources, including peer-reviewed studies, to support the facts in our articles. Read our editorial process to learn more about how we control fact checking and keeping our content accurate, reliable, and reliable. NIH National Institute of Diabetes and Digestive and Kidney Diseases. Irritable bowel syndrome (IBS). Additional reading of your digestive system and how it works at the National Digestive Disease Information Clearinghouse visited in December 2017. Minocha, A. and Adamec, C. (2011) Encyclopedia of digestive and indigestion (2. Ed.) New York: Facts on the file. Under surgery at GERD In recent years, people suffering from severe, chronic heartburn that cannot be controlled by medication have turned the operation in hopes of permanent ization and prevention of esophageal cancer. But the results of a recent study that assessed the well-being of patients ten years after they had surgery questioned its benefits. Heartburn, also known as gastroesophageal reflux disease (GERD), occurs when the opening of the esophagus and stomach relaxes spontaneously, allowing acidic gastric juices to flow into the esophagus and cause irritation. Drugs for GERD include antacids, proton pump inhibitors that reduce acid produced, and drugs that increase the density of the esophagus. Surgery, a possibility usually reserved for heavy-treatment GERD, involves folding the top of the stomach around the end of the esophagus to create a tighter opening. This procedure has become increasingly popular in the development of minimally invasive methods. A study in the late 1980s of 247 heartburn patients found surgery was better than medication to control symptoms. Ten years later study involving 239 patients who received many of the patients undergoing surgery suffered heartburn. Although their symptoms were less intense than those who received the medication in the original study, 62% of surgical patients still took anti reflux drugs regularly (compared to 92% of patients). The study also found that surgery failed to significantly reduce the risk of esophageal cancer compared to medication. Chronic heartburn is a risk factor for this cancer. However, the small size of the study, combined with the low incidence of oesophageal cancer, did not rule out the possibility of difference. A more surprising result of the study showed that surgical patients are more likely to die than patients who have received medication. These deaths were not related to surgery, but almost half (48%) associated with heart disease. The researchers were not prepared to achieve this result and therefore do not have the data to explain this conclusion. The results of this study suggest that while surgery may do a better job of controlling the symptoms of heartburn, it does not eliminate the need for medication or reduce the risk of cancer. In general, surgery should be seen as an option as a last resort for patients whose symptoms are difficult to treat with medications. The digestive system converts the food you eat into parts that can be used for energy and nutrients. It uses chemical and mechanical processes to break down food. The mechanical component involves chewing, which mastaacates food between the tongue and teeth. The chemical component includes saliva, stomach acid, and digestive enzymes. After the nutrients of the food have been absorbed, the resulting residual product is discarded. We mentioned that saliva is one of the important fluids that help break down food. Did you know that there are between 800 and 1,000 minor salivary glands? This number is on top of the three main pairs of salivary glands in the mouth. Saliva doesn't just digest food. It also plays an important role in the care of dental health. One of the reasons why it is important to brush our teeth before bed is our mouths do not produce as much saliva at night. This will make your teeth more vulnerable to cavities, as all the bacteria left over from dinner will have time to cause havoc. Organ digestion include the gastrointestinal tract, which is where all the action takes place and some accessory organs. It's a very long tube that starts from the mouth and ends with an anus. Accessories secrete different substances from the gastrointestinal tract, which make the whole process easier. Here's a brief look at organ digestion. KATERYNA KON/SCIENCE PHOTO LIBRARY/Getty Images For oral cavity. It's in your mouth, and although it's not technically an organ, it's important because digestion starts in your mouth when you bite and chew your food, thus mixing it with saliva. Saliva (or spit) moisturizes food so it's easier to swallow. It also contains a bit of salivation digestive enzyme that breaks down carbohydrates. The throat is part of your throat, where the back part of the mouth meets the esophagus and trachea (your throat). As for the mouth, it is not technically an organ, but it is important. When you're done eating, your tongue rejects the food. Valve tissue called epilopathic inflammation closes the trachea when you swallow so that the food does not go to the wrong tube. Esophagus. When you swallow that bolus food, it moves down the esophagus to your stomach. It's just a pipe and not a complicated organ. Stomach. Your stomach is a muscular bag-like organ. Cells in the stomach lining secrete stomach juices, which break down proteins, and to a lesser extent fat, and a few other things. The muscles contract and squeeze the contents of the stomach to mix them with juice. It turns the pieces of food that you swallow into a liquid substance called chyme. In the small intestine. The small intestine is where digestion finishes and nutrient absorption takes place. Digestive enzymes break down the last bits of food into individual nutrients so that they can be transported across small intestinal walls and into the bloodstream. There are three parts of the small intestine called the duodenum, jejunum, and the loins. The large intestine. By the time chyme reaches the large intestine, nutrients will be absorbed, so the main function here is to absorb some water and prepare the leftovers for elimination as fecal material. It ends in the rectum and the anus. All that saliva has to come from somewhere, and that's what the salivary glands fit. You have three pairs of glands, parotid, sublingual and submandibular glands, all related to the mouth. It is a very busy organ with many functions, but as far as digestion is concerned, it produces bile that is excreted in the small intestine, which helps break down fats and oils. Gallbladder. A small bag-like organ that stores bile until it's needed. It's good to have a gallbladder, but you can live without one if you need one. Pancreas. This organ changes digestive enzymes that break down carbohydrates, fats and proteins in the small intestine. It also secretes bicarbonate in the small intestine, which neutralizes the acidic pH chyme. Brain and nose? You could argue the brain has an accessory organ because just thinking food can start flowing saliva. In this way, your nose is also important because fragrant foods you also like get from your mouth to watering. Having to jump to start saliva does not help digestion because it makes it easier to chew and swallow food. Thanks for the feedback! What are your concerns? Verywell Health uses only high-quality sources, including peer-reviewed studies, to support the facts in our articles. Read our editorial process to learn more about how we control fact checking and keep our content accurate, reliable and United States Department of Health and Human Services, National Digestive Disease Information Collector (NDDIC). Your digestive system and how it works. Peyrot des gachons C, Breslin PA. Saliva amylase: digestion and metabolic syndrome. Curr Diab Rep. 2016;16(10):102. doi:10.1007/s11892-016-0794-7 Saran M. Anatomy, head and neck, vocal cords. StatPearls [Internet]. Azzouz LL. Physiology, Colon. StatPearls [Internet]. Kessler AT, Bhatt AA. Overview of major and small salivary glands, Part 1: anatomy, infectious, and inflammatory processes. J Clin Imaging Sci. 2018;8:47. doi:10.4103/jcis. JCIS_45_18 Additional Reading Cheng LK, O'grady G, Du P, Egbuji JU, Windsor JA, Pullan AJ. Gastrointestinal. Wiley Interdiscip Rev Syst Biol Med. 2010;2(1):65-79. doi:10.1002/wsbm.19 Greenwood-van meerveld B, Johnson AC, Grundy D. Gastrointestinal physiology and function. Handb Exp Pharmacol. 2017;239:1-16. doi:10.1007/164_2016_118 doi:10.1007/164_2016_118

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