

This is effectively the opposite of gastroparesis: the stomach contents are propelled too quickly into the small intestine before they have undergone the necessary digestive processes.

It is an uncommon condition, usually seen after gastric surgery (which may damage the system that controls digestion) or in a rare condition, Zollinger-Ellison syndrome (extreme peptic ulcer disease and gastrin-secreting tumours of the pancreas).

Excessively rapid delivery of a meal into the small intestine (jejunum) stimulates an exaggerated hormonal response (e.g. insulin and others)

Early dumping

begins during or right after a meal

- nausea/vomiting, bloating, diarrhoea, shortness of breath.

Late dumping

1-3 hours after eating

- symptoms due to a reactive low blood sugar and sudden diversion of blood to the gut (low blood pressure results)
- weakness, sweating, dizziness.

Both types may be seen together in some patients.

Diagnosis is made using blood tests, provoking the symptoms with oral loading dose of glucose.

Treatment includes changing eating habits: eating several small meals a day, (low in carbohydrates), drinking liquids between meals not with them.

Medication such as Ocreotide to slow the gut down may be needed in severe cases. (but it has side effects such as diarrhoea)