ULCERATIVE COLITIS

Ulcerative colitis is a type of inflammatory bowel disease that causes chronic inflammation of the large intestine. It causes diarrhea, belly pain, and bloody bowel movements. These symptoms happen because the large intestine becomes inflamed and gets sores, called “ulcers.” The large intestine is also called the colon.

SYMPTOMS

Symptoms can be mild or severe. They might happen just once. Or they might go away and come back over and over again. Possible symptoms include diarrhea blood bowel movements, bleeding from the anus, mucous coming out of the anus, belly cramps, fever, weight loss, swelling pain in the hips and knees, and swelling and pain in the eyes or skin.

DIAGNOSIS

There are a few tests that can help doctors diagnose ulcerative colitis. Doctors usually use a test called colonoscopy to make the diagnosis. For these tests, the doctor puts a thin tube into your rectum (the lower part of the large intestine) and threads it up into your colon. The tube has a camera attached to it, so the doctor can look inside your colon. The tube also has tools attached, so the doctor can take samples of tissue to look at under the microscope. Other tests might include imaging tests.

TREATMENT

Your symptoms might improve if you:

● Cut down on foods that make your symptoms worse (table 1)

● Avoid pain medicines such as ibuprofen (sample brand names: Motrin, Advil) and naproxen (brand name: Aleve).

If you start cutting foods out of your diet, your doctor might suggest that you take a multivitamin and a folic acid supplement. If you stop eating dairy, you should take calcium and vitamin D. These supplements will make up for nutrients you might be missing.

Depending on your symptoms, your doctor might prescribe:

● Medicines that you put directly into your rectum. These reduce swelling in mild cases. It takes about 3 to 4 weeks before they start working.

● Medicines that you take in a pill. A common one is called “5-ASA.”

● A brief course of medicines called steroids to reduce swelling. (These are not the same steroids that athletes use to build muscle.)

● Stronger medicines for severe cases. These medicines work on your immune system to protect your colon from damage. Common ones are “6-mercaptopurine,” “azathioprine,” and anti-tumor necrosis factor (anti-TNF) medicines such as “infliximab” and “adalimumab.”

For most people, symptoms go away after just a few weeks of treatment.
However, when medicines and changes in diet don’t work, surgery is a management option.

INCREASED RISK OF COLON CANCER

Ulcerative colitis does increase the risk of developing colon cancer. Your risk depends on how long you’ve had it and whether your colon is affected. Experts suggest that people with ulcerative colitis that affects the colon get screened early and often. This might mean having a colonoscopy a few years after being diagnosed, and every 1 to 2 years after that.

SUMMARY

People with ulcerative colitis often need lifelong treatment. But with treatment, many people with the condition are able to live fairly normal lives. In all cases, appropriate follow-up care by an expert doctor is essential to treat the disease and prevent or properly manage complications that may arise.

Doctors at Comprehensive Digestive Institute of Nevada have received extensive training for the management of ulcerative colitis from the top Inflammatory Bowel Diseases Academic Centers in the U.S. Our doctors have had a number of internationally recognized research publications and review article on Inflammatory Bowel Diseases. We strive to help all patients find relief from ulcerative colitis. We offer compassionate care using the most advanced techniques available.