Ulcerative Colitis Lecture 10

Ulcerative Colitis

Ulcerative colitis (UC) is an inflammatory bowel disease. It causes irritation, inflammation, and ulcers in the lining of your large intestine (also called your colon).

There's no cure, and people usually have symptoms off and on for life. But the right treatments can help you keep a handle on the disease.

Symptoms

- Diarrhea, often with blood or pus
- Abdominal pain and cramping
- Rectal pain
- Rectal bleeding passing small amount of blood with stool
- Urgency to defecate
- Inability to defecate despite urgency
- Weight loss
- Fatigue
- Fever
- In children, failure to grow

Types of ulcerative colitis

- ► <u>Ulcerative proctitis</u>. Inflammation is confined to the area closest to the anus (rectum), and rectal bleeding may be the only sign of the disease.
- Proctosigmoiditis. Inflammation involves the rectum and sigmoid colon—the lower end of the colon. Signs and symptoms include bloody diarrhea, abdominal cramps and pain, and an inability to move the bowels in spite of the urge to do so (tenesmus).
- Left-sided colitis. Inflammation extends from the rectum up through the sigmoid and descending colon. Signs and symptoms include bloody diarrhea, abdominal cramping and pain on the left side, and urgency to defecate.

Pancolitis. This type often affects the entire colon and causes bouts of bloody diarrhea that may be severe, abdominal cramps and pain, fatigue, and significant weight loss

Causes

The exact cause of ulcerative colitis remains unknown. Previously, diet and stress were suspected, but now doctors know that these factors may aggravate but don't cause ulcerative colitis.

One possible cause is an immune system malfunction. When your immune system tries to fight off an invading virus or bacterium, an

abnormal immune response causes the immune system to attack the cells in the digestive tract.

Heredity also seems to play a role in that ulcerative colitis is more common in people who have family members with the disease. However, most people with ulcerative colitis don't have this family history

Risk factors

Ulcerative colitis affects about the same number of women and men. Risk factors may include:

- Age. Ulcerative colitis usually begins before the age of 30. But it can occur at any age, and some people may not develop the disease until after age 60.
- Race or ethnicity. Although whites have the highest risk of the disease, it can occur in any race.
 - Family history. You're at higher risk if you have a close relative, such as a parent, sibling or child, with the disease.

Complications

Possible complications of ulcerative colitis include:

- Severe bleeding
- A hole in the colon (perforated colon)
- Severe dehydration
- Bone loss (osteoporosis)
- Inflammation of your skin, joints_and eyes
- An increased risk of colon cancer
- A rapidly swelling colon (toxic megacolon)
 - Increased risk of blood clots in veins and arteries

Diagnosis

To diagnose ulcerative colitis in children, teenagers and adults, your healthcare provider has to rule out other illnesses. After a physical exam, your provider may order:

- <u>Blood tests</u>: Your diagnosedblood can show signs of infection or anemia. Anemia is a low level of iron in your blood. It can mean you have bleeding in the colon or rectum.
 - Stool samples: Signs of infection, parasites (tiny organisms that can live in a person's body), and inflammation can show up in your poop.
- <u>Imaging tests</u>: Your healthcare provider may need a picture of your colon and

rectum. You may have tests including a magnetic resonance imaging (MRI) scan or computed tomography (CT) scan.

• Endoscopic tests: An endoscope is a thin, flexible tube with a tiny camera. Specialized doctors can slide the endoscope in through the anus to check the health of the rectum and colon. Common endoscopic tests include colonoscopy and sigmoidoscopy.

Treatment

The main aims of treatment are to:

- ✓ reduce symptoms, known as inducing remission (a period without symptoms)
- ✓ maintain remission This usually involves taking various types of medicine, although surgery may sometimes be an option.

Your treatment will normally be provided by a range of healthcare professionals, including:

- ✓ specialist doctors, such as gastroenterologists or surgeons
- ✓ GPs
- ✓ specialist nurses