

Ulcerative colitis

Overview:

- A Chronic disease that affects people at any age; but it is most common between the ages of 15 and 30 years.
- Ulcerative colitis affects the deepest lining of the large intestine (colon) and rectum.
- Symptoms usually appear gradually over time and not suddenly.
- Its symptoms can be treated with drugs that control inflammation.
 Treatment may also be surgical.
- There is still no way to prevent the disease; however, there are tips that can be followed to ease the symptoms.

Introduction:

A chronic disease of the inner lining of the large intestine (colon and rectum); causing inflammation or swelling and sores, called ulcers, on the inner lining of the large intestine. It can occur at any age; but the most common is between the ages of 15 and 30 years.

Colon:

Colon is part of the large intestine, located below the abdomen and occupying a large area of the abdomen. It also extends from the bottom of the rib cage to the pelvic area horizontally. It is the last part of the large intestine, where the colon contains 4 parts:

- Sigmoid colon (before anal area).
- Descending colon.
- Transverse colon.
- Ascending colon.

Other names:

Ulcerative colon - Colon ulcers



Types:

Often categorized by location, including:

- Ulcerative proctitis: Inflammation is limited to the area closest to the anus, where bleeding is the sign of this type.
- Sigmoiditis: Involves the lower end of the colon.
- Left-Sided Ulcerative Colitis Inflammation extends from the rectum to the sigmoid colon and descending colon.
- Ulcerative Colitis: Inflammation often affects the entire colon, causing bouts of bloody diarrhea that may be severe.
- Severe acute ulcerative colitis (rare): This type affects the entire colon and causes severe pain, severe diarrhea and bleeding, with the inability to eat.

Cause:

The exact cause of the disease is unknown; it was previously suspected to be linked to diet and stress; but these factors may aggravate the disease but not cause it in the first place. There are also a number of factors likely to play a role in the disease development, such as:

- Heredity: As genes may increase your risk.
- Overactive immune system: An abnormal immune reaction in the intestine.

Risk factors:

- Age, as it usually occurs before the age of 30 years.
- Family history.
- Excessive intake of dairy products.
- Taking antacids (steroids).
- Smoking.



Symptoms:

Symptoms usually appear gradually over time and not suddenly. Most people with this disease suffer mild to moderate symptoms, including:

- Diarrhea with blood or pus.
- Abdominal pain.
- Fatigue or tiredness
- nausea or loss of appetite
- Weight loss.
- Fever.
- Anemia.

Symptoms can vary from person to person, depending on the severity of the inflammation and its location.

When to see a doctor?

When you notice a constant change in bowel routine or when you notice the following:

- Blood in stool
- Persistent diarrhea that does not respond to medicines.
- Inexplicable fever for more than one or two days.

Complications:

- Rectal bleeding.
- Colon hypertrophy.
- Osteoporosis.
- Infections in the eyes, skin and joints
- Increased risk of colon cancer

Diagnosis:

- Medical history.
- Family history.



- Clinical examination.
- Laboratory tests: Blood and stool test
- Other tests: Colonoscopy, X-ray, CT scan.

Treatment:

Treatment depends on the severity of the conditions and symptoms, in addition to the patient's health condition. Treatment is either pharmacological or surgical; where pharmacological treatment involves:

- anti-inflammatory drugs.
- Corticosteroids.
- Immune system inhibitors.

Surgery often involves removing the entire colon and rectum, with surgery to expel waste naturally. n some cases, a permanent opening is made in the abdomen through which stool may be passed and collected in an accessory bag.

Prevention:

There is still no way to prevent the disease; however, there are tips that can be followed to ease the symptoms.

Tips for patients:

- Consult your doctor before using antibiotics, painkillers, anti-diarrheal medicines or iron supplements; as the severity of the disease may increase.
- Avoid caffeine and foods that increase the severity of the disease (such as: Foods rich in fiber and spicy foods).
- Maintain the diet that has been prescribed by your doctor.
- Divide meals into five or six small meals.
- Drink plenty of fluids to prevent dehydration.
- Do not stop eating certain food groups without talking to your doctor.



- Manage stress levels by physical activity, breathing exercises and relaxing.
- Make sure to control the symptoms before pregnancy.
- Quit smoking.

Frequently Asked Questions:

- Can a patient with ulcerative colitis become pregnant? There is no relationship between a woman's fertility and her readiness to get pregnant when having ulcerative colitis, but in case of complications of the disease and the patient undergoes surgical treatment, it was found that fertility rates in women decreased by 26% after surgery.
- Does taking vitamins on an empty stomach cause ulcerative colitis? There is no link, because the infection is usually in the lower part of the intestine, and vitamins are absorbed by the upper part.

Misconceptions:

• The disease can be treated by changing the diet.

Fact: when referring to factors causing the disease, we find that the personal diet is one of the factors. thus, changing the diet plays a role in prevention.

• Ulcerative colitis is Crohn's disease.

Fact: Crohn's disease affects the entire gastrointestinal tract from the mouth to the anus, and the symptoms are usually pain, involving all the intestines, unlike ulcerative colon which affects the lower part, and thus pain is only felt in the lower abdomen.

• Ulcerative colitis means cancer

Fact: Ulcerative colitis is different from cancer in many ways. Ulcerative colitis is a normal inflammation of the tissues of the inner lining of the



intestine. There is no accelerated cell proliferation and a change in the nature and division of cells as in cancer.

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