

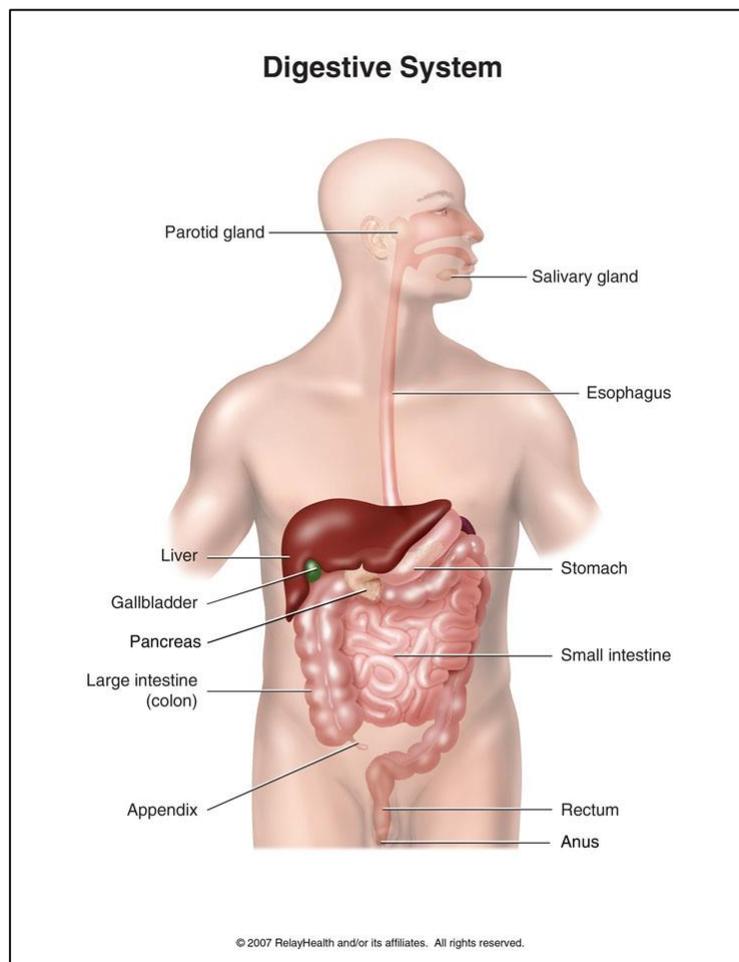
Ulcerative Colitis

What is ulcerative colitis?

Ulcerative colitis is a disease that causes inflammation and sores in the lining of the large intestine (colon) and rectum. It is a life-long condition, but your symptoms may come and go and there may be times when you are completely free of symptoms.

Ulcerative colitis is 1 of the 2 illnesses called inflammatory bowel disease. (The other disease is Crohn's disease.) Unlike Crohn's disease, which can affect the digestive system anywhere from the mouth to the rectum, ulcerative colitis involves just the the colon and rectum.

You may have an attack of ulcerative colitis and then not have any symptoms for months or even years. Only about half of the people who have ulcerative colitis have an attack of symptoms more than once a year. However, in most cases the symptoms eventually return. Ulcerative colitis can usually be controlled with medicines and diet, but you may need surgery if your symptoms are severe.



What is the cause?

Doctors don't know what causes this disease, but it does seem to run in families. It appears to be an autoimmune problem, which means that your body's defenses against infection are attacking your own tissue. However, this has not been proven to be the cause of this disease.

The disease is not caused by emotional stress or sensitivity to certain foods. However, these things may trigger symptoms or make them worse.

What are the symptoms?

The symptoms usually come and go. They may include:

- diarrhea, usually with blood or mucus with the constant feeling of needing to move your bowels (the most common symptom)
- crampy pain in your lower belly
- fever
- weight loss
- tiredness
- symptoms of dehydration, such as lightheadedness and a dry sticky mouth

How is it diagnosed?

Your healthcare provider will ask about your symptoms and examine you. The exam will include a rectal exam to look for inflammation and sores and to check for blood in the stool.

Tests you may have are:

- blood tests
- barium enema X-ray exam
- colonoscopy

Colonoscopy is a procedure for looking inside the large intestine with a thin, flexible tube and tiny camera. During this procedure your provider may do a biopsy, taking a small piece of tissue for lab tests.

There are risks of injuring the already damaged colon with some tests, such as a barium enema. Colonoscopy is the preferred test for looking inside the bowel for signs of this disease, especially if your symptoms are severe.

How is it treated?

Your healthcare provider may advise a special diet high in protein and calories. Depending on your condition, your diet may need to be high fiber or low fiber.

Medicines often prescribed to treat ulcerative colitis include:

- anti-inflammatory medicine
- antibiotics
- immune system suppressors

Infliximab (Remicade) is an example of one of the newer immune suppressing medicines. It helps keep your immune system from recognizing your bowel as foreign tissue and attacking it.

Some people with this disease find short-term relief using nicotine patches, although the reason this is helpful is not known. You should discuss the risks and benefits of this treatment with your healthcare provider.

Some of the medicines prescribed by your provider are taken by mouth. Others are used as suppositories or enemas.

Researchers are working to find better anti-inflammatories and immune suppressants. If your medicines aren't working well, you can ask your healthcare provider if there are clinical trials of new medicines that you might participate in.

In addition to medicines that help control inflammation and prevent damage to your bowel, you will likely need other medicines from time to time to control your symptoms when your disease is active. For example, your healthcare provider may prescribe antidiarrheal medicine. Diarrhea can make it harder for you to keep doing your normal daily activities. It can cause dehydration and make it hard for you to absorb nutrition from your food.

You may also need:

- acetaminophen for pain
- vitamins and minerals

In some cases you may need to stay in the hospital. Your treatment may include:

- resting your bowel by not eating
- intravenous (IV) feeding to give you nourishment while you are resting your bowel
- blood transfusions to replace blood you have lost
- IV medicines
- nasogastric suction to remove stomach juices through a tube passed through your nose (this allows the stomach and intestines to rest)

Some people have an attack of colitis and then may not have any symptoms for months or even years. However, in most cases the symptoms eventually return. Ulcerative colitis can usually be controlled with medicines and diet, but you may need surgery if your symptoms are severe. Most of the time just part of the colon needs to be removed. In more severe cases, however, all of the colon may be removed and an opening made in your belly to remove wastes from the body (colostomy). Removal of the colon cures the disease.

Ulcerative colitis increases your risk for cancer of the colon. Your healthcare provider will recommend that you have a colonoscopy on a regular schedule to look for cancer so you can catch it at an early stage if it happens.

How can I take care of myself?

- Follow the treatment plan your healthcare provider prescribes. You and your healthcare provider will need to be partners in controlling your symptoms. Ask how you can take care of yourself at home. Also ask when you should call or see your provider about new or worsening symptoms as well as how often you should have regular checkups.
- Follow the diet recommended by your provider. Avoid food and drinks that make your symptoms worse, such as milk products for some people.
- When you have diarrhea, rest your bowel by drinking only clear liquids such as water, juice, tea, and bouillon for a few hours. It is important to drink small amounts often so you don't get dehydrated. Suck on ice chips if you feel too nauseated to drink anything. Do not eat solid foods if they cause cramps.
- Learn to use deep breathing exercises and other relaxation techniques when you feel stress.
- Make sure you get enough rest and sleep.
- Learn to recognize the signs of recurrence early so you can get early treatment.

Because chronic ulcerative colitis may be a risk factor for cancer of the intestine, make sure you have regular checkups. Follow your healthcare provider's recommendations for colon cancer screening exams.

For more information, contact:

Crohn's and Colitis Foundation of America

Phone: 800-932-2423

Web site: <http://www.ccfa.org>.

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[References](#)

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