

30 Better
DAYS TO Gut Health

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Inflammatory bowel disease

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Let's explore some of the issues we can have with our guts: inflammatory bowel disease affects many of us so it's important to understand the distinctions

According to the charity Crohn's and Colitis UK, over 300,000 people in the UK have inflammatory bowel disease (IBD). The two main types are Crohn's disease and ulcerative colitis. In both of these conditions, the gut becomes inflamed and ulcerated which affects its function, including its ability to digest food and absorb nutrients. These are life-long conditions and, although they can be unpredictable and vary over the course of time, treatments can help to keep them under control and people with IBS can lead normal lives.

It's important not to confuse IBD with IBS. They are completely different conditions with different causes, treatments and outcomes. It is, however, possible to have both at the same time.

Who gets inflammatory bowel disease?

Any of us can get Crohn's disease or ulcerative colitis, but they most commonly develop before 30 years of age. You are more likely to be affected if you have a relative with the condition. This suggests that there is a genetic link, but the causes are not fully understood. Crohn's disease and ulcerative colitis are autoimmune conditions, which means the body starts attacking its own healthy tissues. It's not known why this happens. Other possible factors that play a role include the make-up of your gut bacteria, whether you smoke and previous bowel infections. Where you live may also influence your risk suggesting that our environment might be important.

When should you see the doctor?

The symptoms of IBS can be mild or very severe, develop slowly or come on suddenly. If you are

having recurrent diarrhoea, losing blood in your poo, or feel unwell with fatigue, abdominal pains or weight loss, you should see your doctor. Simple stomach bugs usually settle within a few days, but IBS doesn't. Sometimes there are symptoms that aren't to do with your gut such as sore, irritated eyes or skin rashes. You won't be able to diagnose this yourself or tell whether your symptoms are due to a gut sensitivity, so it's important you speak to your doctor.

What's the difference between Crohn's disease and ulcerative colitis?

Crohn's disease and ulcerative colitis have very similar symptoms with flare-ups and remissions, but there are some differences between the two that it's useful to get your head around. Crohn's disease can affect any part of your gut, not just the bowel. You might have issues from your mouth to your anus, but it most commonly affects the end of the small intestine. Ulcerative colitis on the other hand only affects the large bowel. The inflammation in ulcerative colitis stays within the lining of the gut and doesn't extend more deeply into the bowel wall, which happens in Crohn's disease. The inflammation of the bowel is continuous in ulcerative colitis, whereas Crohn's disease has patchy inflammation with areas of normal tissue in between.

How do I know which type of inflammatory bowel disease I have?

It's really important to know whether you have Crohn's disease or ulcerative colitis. Getting a diagnosis means you will have the right

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treatments to control the condition. Because the symptoms of both can be similar and blood tests don't yet give an absolute answer, doctors really need to look at the bowel to see which parts are affected and the pattern of the inflammation. This might be done using CT and MRI scans, or endoscopy, where the doctor can directly see the gut lining through a camera and take a small biopsy (sample) of tissue to be examined under a microscope.

Treatments for inflammatory bowel disease

Thankfully, there are a variety of treatments available for both Crohn's disease and ulcerative colitis. There's lots of research underway to improve these treatments and discover new ones too. The aims of the treatment are to control flare-ups and reduce any inflammation that is already there, then to keep the disease in remission by stopping inflammation recurring. Your care will be overseen by a consultant gastroenterologist and specialist nurses who will liaise with your GP about your treatment.

Active inflammation can be reduced using steroid medications such as prednisolone. If you have ulcerative colitis, then you will probably be given a 5-ASA medication such as mesalazine, either instead of or as well as a steroid. Unfortunately, 5-ASAs don't work well for Crohn's disease. 5-ASAs can also be used regularly to keep the condition in remission. Because the immune system is involved in both Crohn's disease and ulcerative colitis, immunosuppressant medications such as azathioprine, which dampen the immune system, can be helpful. These can reduce flare-ups, but are also commonly used long term to stop symptoms returning. There are other

options available if these treatments don't work including biologic medicines, which are given by an infusion or injection.

Sometimes, after careful discussion, you may be offered surgery to remove damaged or severely affected parts of your bowel. You will then require a stoma bag to collect your poo. This is a huge undertaking, but can be a very positive step for people with difficult to treat symptoms and stop them being so limited by their condition.

deficient in certain vitamins and minerals. Eat foods rich in calcium and iron as these are common deficiencies in inflammatory bowel disease. You should take a daily vitamin D tablet as this is not well absorbed from food. Plenty of fibrous foods such as fruit and vegetables will help keep your gut bacteria healthy. You may need a referral to a dietician if you're having flare-ups to make sure you're getting adequate nutrition. They can also give you advice about how to manage your diet when eating may be difficult.

“Eat food rich in calcium and iron as these are common deficiencies in inflammatory bowel disease”

Lifestyle changes for inflammatory bowel disease

Changing your lifestyle is not going to make your inflammatory bowel disease go away completely, but it can help to reduce some symptoms and help you cope with those that persist.

Nutrition

What you eat is very important because an inflamed gut doesn't absorb nutrients very well, so during flare-ups there's a risk of becoming

Mental health

It's really important to acknowledge that having any long-term condition can affect your mental health. Frequent diarrhoea, abdominal pains or fatigue can make going out difficult. It's easy to become isolated which can lead to anxiety and depression. Looking after your mental health is therefore really important. Asking others for help and doing regular exercise are two things that can definitely improve things.

Daily intake

Enjoy meals at regular times, chew well and eat slowly. You may find it easier to digest and tolerate smaller portions of food rather than larger portions. Drink at least 8 cups (2 litres) of fluids per day (e.g. water or herbal tea) to stay hydrated.



The symptoms of... **CROHN'S DISEASE**

It's important to know what to look out for if you suspect that you may have Crohn's disease, or it runs in the family

Common symptoms associated with Crohn's disease include:

- Diarrhoea
- Blood in your stools
- Abdominal pain - cramping pains, often low on the right hand side of your abdomen
- Nausea and vomiting
- Weight loss
- Excessive tiredness
- Anal fissures (deep cracks in the skin around your anus)

Crohn's disease can affect other parts of the body and cause:

- Joint pain and swelling
- Red and sore eyes
- Mouth ulcers
- Anaemia
- Skin rashes
- A high temperature

Inflammatory Bowel Disease



The symptoms of... **ULCERATIVE COLITIS**

Similar to Crohn's disease, the symptoms associated with ulcerative colitis can be wide ranging

Common symptoms associated with ulcerative colitis include:

- Diarrhoea - loose watery stools
- Blood, mucous or pus in your stools
- Abdominal pain
- Weight loss
- Poor appetite
- Excessive tiredness

If ulcerative colitis is affecting the body more widely you can experience:

- Joint pain and swelling
- Red and sore eyes
- Mouth ulcers
- Anaemia
- Swellings under the skin called erythema nodosum
- A high temperature

