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Crohn's Disease: What You Should Know



Crohn's disease affects men and women equally and seems to run in some families. About 20 percent of people with Crohn's disease have a blood relative with some form of inflammatory bowel disease. Crohn's disease can occur in people of all ages, but is more often diagnosed in people between the ages of 20 and 30.

Crohn's disease is an ongoing disorder that causes inflammation of the digestive tract, also referred to as the gastrointestinal (GI) tract. Crohn's disease can affect any area of the GI tract, from the mouth to the anus, but it most commonly affects the lower part of the small intestine, called the ileum. The swelling extends deep into the lining of the affected organ. The swelling can cause pain and can make the intestines empty frequently, resulting in diarrhea.

Crohn's disease is an inflammatory bowel disease, the general name for diseases that cause swelling in the intestines. Because the symptoms of Crohn's disease are similar to other intestinal disorders, such as irritable bowel syndrome and ulcerative colitis, it can be difficult to diagnose. Ulcerative colitis causes inflammation and ulcers in the top layer of the lining of the large intestine. In Crohn's disease, all layers of the intestine may be involved, and normally healthy bowel can be found between sections of diseased bowel.

What causes Crohn's Disease?

Several theories exist about what causes Crohn's disease, but none have been proven. The human immune system is made from cells and different proteins that protect people from infection. The most popular theory is that the body's immune system reacts abnormally in people with Crohn's disease, mistaking bacteria, foods, and other substances for being foreign. The immune system's response is to attack these "invaders." During this process, white blood cells accumulate in the lining of the intestines, producing chronic inflammation, which leads to ulcerations and bowel injury.

What are the symptoms?

The most common symptoms of Crohn's disease are abdominal pain, often in the lower right area, and diarrhea. Rectal bleeding, weight loss, arthritis, skin problems, and fever may also occur. Bleeding may be serious and persistent, leading to anemia. The range of severity of symptoms varies.

How is Crohn's disease diagnosed and treated?

Many tests are used to diagnose Crohn's disease. A physical exam and medical history are usually the first step. Blood tests may be done to check for anemia. An upper GI series may be done to look at the small intestine as well as a colonoscopy or sigmoidoscopy. Treatment for Crohn's disease depends upon the severity of the disease. Each person experiences ulcerative colitis differently, so treatment is adjusted for each individual.

- **Drug Therapy** – the goal of drug therapy is to induce and maintain remission, and to improve the quality of life.
- **Nutrition Supplements** – occasionally patients need extra nutrition temporarily, those whose intestines need to rest, or those whose intestines cannot absorb enough nutrition from food.
- **Surgery** – about 2/3 to 3/4 of Crohn's disease patients must eventually have surgery to relieve symptoms that do not respond to medical therapy or to correct complications such as blockage, perforation, abscess, or to relieve bleeding in the intestine.

Additional Resources

Crohn's & Colitis Foundation of America www.ccfa.com

National Digestive Diseases Information Clearinghouse – a service of the National Institute of Diabetes and Digestive and Kidney Diseases
<http://digestive.niddk.nih.gov>

For More Information:

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