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Inflammatory Bowel Disease: Crohn's Disease



What is Inflammatory Bowel Disease (IBD)?

IBD refers to a chronic inflammation of the intestines not due to infections or other identifiable causes. There are two main types of IBD: ulcerative colitis and

Crohn's disease. Ulcerative colitis affects only the lining of the large intestine (the colon), while Crohn's disease can involve any part of the intestine, small or large, and irritate not only the lining, but also deeper layers.

How common is Inflammatory Bowel Disease?

It is estimated that about 1,000,000 Americans suffer from IBD. Males and females are affected equally. Crohn's disease may occur at any age, including young children but occurs most often in young adults. Most cases of Crohn's disease are diagnosed before age 30. Crohn's disease tends to occur in families and in certain ethnic groups, such as Eastern European Jews. About 5-8% of patients may have a family member with IBD and about 20-25% of patients may have a close relative with the condition. However, it can occur in any ethnic group and in members of families where no one else is suffering from these diseases.

What causes Crohn's disease?

It is currently believed that Crohn's disease occurs in individuals as a result of genetic and environmental factors. For unknown reasons, the immune system becomes abnormally active against the individual's own system. It targets not only the intestine, but sometimes other organs like the skin, the eyes, or the liver.

What are the symptoms of Crohn's disease?

The most common symptoms are:

- Diarrhea, sometimes with blood and mucus
- Abdominal pains
- Loss of appetite and weight loss
- Unexplained fevers and tiredness
- Delayed growth and maturation

How is Crohn's disease diagnosed?

The diagnosis of Crohn's disease may be suspected on the basis of the medical history, but the final determination depends on the results from the required diagnostic tests. The work-up usually includes:

- Blood tests

- X-rays and CT scans of the intestine
- Endoscopy and biopsies of the upper and lower intestine and parasites

How is Crohn's disease treated?

The aim of treatment is to decrease the inflammation causing the damage to the intestines. Even though a cure is not yet possible, control of symptoms can be very effective in most patients. The number of medications available continues to increase, and new treatments can be expected in the future. The medications most commonly used to treat Crohn's disease are:

- Antibiotics, such as metronidazole, ciprofloxacin and amoxicillin
- ASA anti-inflammatories, such as Azulfidine®, Colazal®, Asacol® and Pentasa®
- Steroids, such as prednisone, prednisolone or budesonide
- Immuno-modulators, such as Purinethol®, Imuran® or methotrexate
- Biologicals, such as Remicade®
- Nutritional treatments with supplemental liquid formulas. This can be particularly applicable to children who eat poorly and are not growing normally.

Is there a role for surgery?

Because there is high risk of recurrence after surgery, this option is reserved for complications such as an obstruction from a narrowed area of the intestine, chronic pain, bleeding, or when using all other medicine does not work.

For more information or to locate a pediatric gastroenterologist in your area please visit our website at: www.naspgghan.org

IMPORTANT REMINDER: This information from the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN) is intended only to provide general information and not as a definitive basis for diagnosis or treatment in any particular case. It is very important that you consult your doctor about your specific condition.

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