

## Crohn's Disease

### What is Crohn's Disease?

Crohn's Disease is a chronic condition that causes inflammation any part of the digestive system or gut. The most common area affected is the end of the ileum (the last part of the small intestine), or the colon.

The areas of inflammation are often patchy with sections of normal gut in between. A patch of inflammation may involve a few centimetres, or extend quite a distance along part of the gut. As well as affecting the lining of the bowel, Crohn's may also go deeper into the bowel wall. It's one of the two main forms of Inflammatory Bowel Disease (IBD). The other is [Ulcerative Colitis](#).

### What are the symptoms?

The symptoms of Crohn's disease vary from person to person, and may depend on where in the gut the disease is active.

The main symptoms of IBD are:

- **Diarrhoea** sometimes mixed with blood, mucus and pus
- **Cramping pains in the abdomen**
- **Tiredness and fatigue** due to the illness itself, from anaemia (see below), from the side effects of some of the drugs used for IBD or from a lack of sleep if you have to keep getting up at night with pain or diarrhoea
- **Feeling generally unwell**
- **Loss of appetite and loss of weight** due to the body not absorbing nutrients from the food you eat because of the inflammation in the gut.
- **Anaemia** (a reduced number of red blood cells) if you are losing a lot of blood and are not eating much
- **Mouth ulcers**

### Who gets Crohn's Disease?

We think Crohn's Disease affects at least 115,000 people in the UK and millions more worldwide. It is more likely to affect white people of European descent, especially those descended from Ashkenazi Jews (who lived in Eastern Europe and Russia).

The disease can start at any age, but usually appears for the first time between 10 and 40. Surveys suggest that new cases of Crohn's are being diagnosed more often, particularly among teenagers and children. It's slightly more common in women than in men, and also in smokers.

### **What are the causes?**

We now believe that Crohn's is caused by a combination of factors;

- the genes you are born with,
- plus an abnormal reaction of your immune system to certain bacteria in your intestines,
- along with an unknown trigger that could include viruses, bacteria, diet, smoking, stress or something else in the environment.

There isn't a cure at the moment, but drug treatment and sometimes surgery can do a lot to give long periods of relief from symptoms.

### **What treatments are there for Crohn's?**

The main types of drugs commonly used are anti-inflammatory drugs (these include aminosaliclates (5-ASAs), corticosteroids (often just called steroids), immunosuppressants, biologics (or 'anti-TNF' drugs).

Symptomatic drugs are used to help reduce symptoms such as diarrhoea, constipation or pain, but cannot reduce the inflammation. They may include antidiarrhoeals, laxatives, anti-spasmodics, and analgesics (painkillers).

Antibiotics are used to treat and in some cases prevent bacterial infections. They tend to be used for Crohn's Disease rather than for UC.

### **What are the complications of Crohn's disease?**

Crohn's sometimes causes additional health problems, which may be in the gut itself or can involve other parts of the body.

Complications in the gut may include **strictures**, **perforations** and **fistulas**

A variety of other health conditions can be associated with Crohn's Disease, including:

- skin problems, such as mouth ulcers, blisters and ulcers on the skin, and painful red swellings, usually on the legs
- inflammation of the eyes
- thinner and weaker bones
- liver inflammation
- blood clots (including deep vein thrombosis)
- anaemia (a reduced level of red blood cells)

### **When is Surgery required?**

Over the last decade, the development of biological drugs has produced increasingly effective medical therapies for Crohn's Disease. Surgery too has changed and now it is less common to remove large parts of the bowel.

However, surgery remains an important treatment option, often in combination with medical therapies. It is estimated that about seven out of 10 people with Crohn's will still need surgery at some point in their lives.

Surgery is necessary:

- when medical or drug treatment fails to control the inflammation and you may have symptoms such as diarrhoea, pain, poor appetite, and weight loss
- to remove any irreversibly damaged sections of intestine
- to remove strictures (tight narrowing that causes blockages) in the intestine as a result of scarring from the inflammation from Crohn's
- to treat abscesses that can develop inside the abdomen due to inflammation spreading through the full thickness of the bowel wall.



- to treat fistulas that develop when an abscess becomes a connection linking the bowel to another loop of bowel, another organ such as the bladder or vagina, or the outside skin
- to treat perianal fistulas (that link the back passage to the skin near the anus. sections of the intestine
- if cancerous changes occur in your colon because you have had severe Crohn's Disease affecting all or most of the colon for at least 8-10 years
- as an emergency if you have severe bleeding from the bowel, a perforation (a hole or tear in the wall of the bowel), for toxic megacolon (very severe disease of the colon), or to treat a bowel obstruction.

Surgery for Crohn's disease can often be undertaken as laparoscopic (key hole) with quicker recovery in specialist centres. It is best to discuss your surgical options with your surgeon. Further details on the operations for Crohn's disease can be found [here](#)

[THIS HAS BEEN MODIFIED FROM THE CROHN'S AND COLITIS UK WEBSITE](#)