Ulcerative Colitis

Ulcerative Colitis Overview

Ulcerative Colitis (UC) is a disease in which the lining of the colon (the large intestine) becomes inflamed and develops sores (ulcers), which leads to bleeding and diarrhea. The inflammation almost always affects the rectum and lower part of the colon, but it can affect the entire colon.

Ulcerative Colitis Causes

The cause of ulcerative colitis is not known, although genetics and environmental factors both appear to play a role.

Genetics - Ulcerative colitis tends to run in families, suggesting that genetics have a role in this disease. However, only about 10-25 percent of people with ulcerative colitis have a first degree relative (either a sibling or a parent) with inflammatory bowel disease (either ulcerative colitis or Crohn's disease).

Risk factors - When a person with a genetic susceptibility is exposed to a trigger (such as an illness or something in the environment), the immune system can be activated. When this happens, the immune system recognizes the lining of the colon as foreign and attacks it, leading to inflammation. In addition, ulcerative colitis can present after a person quits smoking. However, no single factor has been proven to be a known trigger in all situations.

Ulcerative Colitis Symptoms

The symptoms of ulcerative colitis can be mild, moderate, or severe, and can fluctuate over time. Symptoms may include mucus discharge from the rectum, frequent loose stools, bloody bowel movements, bouts of constipation, weight loss and fever. Patients may also experience symptoms outside of the bowel including inflammation and swelling of the large joints (hips, knees), swelling and pain of the eyes, and skin changes.

Ulcerative Colitis Treatment

There are many different medications that help reduce the symptoms of ulcerative colitis. Almost all of these medications work by reducing inflammation and the body's immune response. Some medicines treat symptoms when they are at their worst. Other medicines help keep symptoms from starting up or coming back (maintenance medication). Mesalamine is a medication often used in patients with ulcerative colitis to prevent flares. When a flare occurs, a course of steroids may also be prescribed in combination with your maintenance medication.

Diet - There is no specific type of diet that has been proven to help people with ulcerative colitis. Some people do notice that certain foods seem to make their symptoms worse. For example, some patients feel better if they avoid dairy foods such as milk, yogurt, and cheese.

Pain medications that contain nonsteroidal and inflammatory drugs (NSAIDS) such as Ibuprofen (Advil, Motrin) and naproxen (Aleve), are not usually recommended if you have ulcerative colitis. **These medications can worsen symptoms**. Acetaminophen (Tylenol) should not cause a problem.

Ulcerative Colitis Surgery

Patients with extensive colitis at diagnosis have a higher probability of needing surgery. Approximately 10% of patients with ulcerative colitis require surgery within the first 10 years of diagnosis. Surgery may include partial or complete removal of the colon.

Colorectal Cancer and Ulcerative Colitis

Patients with ulcerative colitis have an increased risk of colorectal cancer. Your risk of colorectal cancer is related to the length of time since you were diagnosed and how much your colon is affected. Colorectal cancer usually develops from precancerous changes in the colon. In general, colonoscopy is recommended after you first start having symptoms of ulcerative colitis. If this colonoscopy is normal, it is usually repeated every one to three years.