

# Ulcerative Colitis (UC)

## What is ulcerative colitis?

**Ulcerative** [UHL-ser-uh-tiv] **colitis** [kol-LAHY-tis] (**UC**) is a disease of the colon, or large intestine. The colon is where fluids are re-absorbed and waste products are prepared for elimination. UC causes **inflammation** (swelling) and **ulcers** (sores) in the lining of the rectum and colon, usually in a continuous section of the colon, beginning at the rectum. UC is one type of **inflammatory bowel disease (IBD)**, which is the general name for diseases that cause inflammation in the intestines. IBD is different from Crohn's disease, which spreads deeper into the layers of tissue.

## What are the symptoms?

Symptoms vary depending on the severity of your condition and usually include one or more of the following:

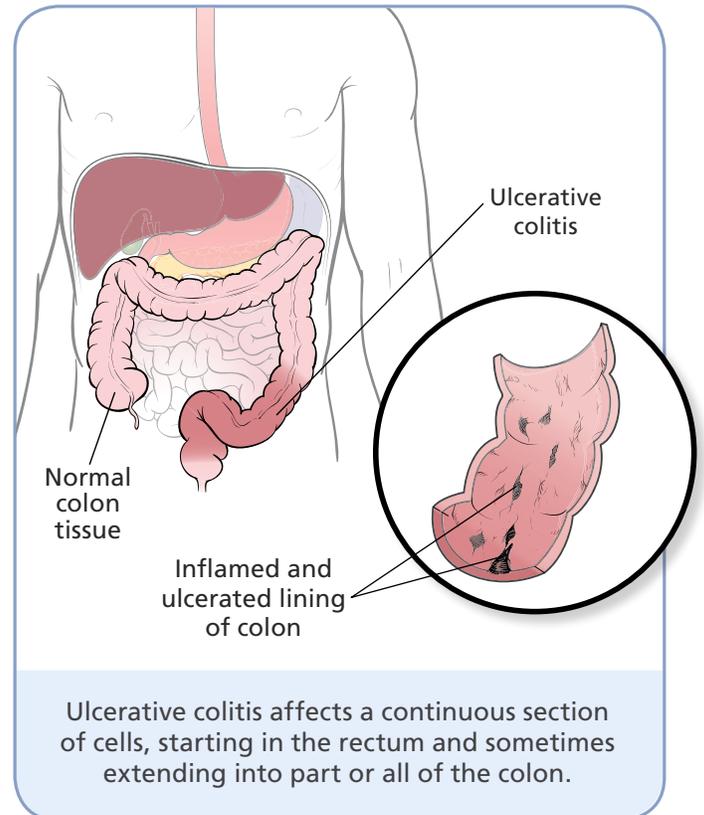
- Abdominal pain
- Dehydration
- Bloody diarrhea
- Rectal bleeding
- Anemia
- Skin lesions
- Weight loss
- Joint pain
- Loss of appetite
- Fatigue

Symptoms can come and go and sometimes disappear for months, or even years, at a time.

## What causes UC?

Doctors aren't sure what causes UC, but most agree that it is NOT caused by sensitivity to certain foods or by stress. However, these factors may trigger symptoms in someone who already has the disease.

We do know that patients with UC have abnormal immune system reactions that kill healthy cells in the lining of the colon. Inflammation and ulcers then form around the dead cells.



It is not clear what causes this abnormal reaction, but you may be more at risk based on your:

- **Family history.** You're more likely to have UC if a close family member has it.
- **Ethnicity.** You're more likely to develop this disease if you are of Eastern European (Ashkenazi) Jewish descent.
- **Age.** UC can start at any age, but usually starts between ages 15 and 30. Less often, it can begin between ages 50 and 70.
- **Environment.** UC is more common among people who live in urban areas and industrialized countries.

## How is UC diagnosed?

- A **colonoscopy** is the best way to tell if you have UC. During a colonoscopy, a thin, flexible tube with a camera at the end (a **colonoscope**) is used to look inside your colon. There, the doctor can see inflammation or bleeding, and can take tissue samples (biopsies) to analyze in a laboratory.
- **Blood tests** are used to look for signs of anemia (low red blood cells) or infection in the rectum or colon.
- A **stool (poop) sample** can also show signs of bleeding or infection in the colon or rectum.
- A **barium enema** allows the doctor to see your entire colon with an x-ray. The inside of your colon is coated with a chalky liquid that contains barium. The barium makes it easier to see any problems with your colon.

## How is UC treated?

- **Medications.** Different types of medicines are used to control the inflammation. It may take time to find the best one for you.
  - **Anti-inflammatory** medications reduce the inflammation of the ulcers.
  - **Immune system suppressors** reduce your immune system's reaction to bacteria. These can also reduce inflammation and symptoms.
  - **Other medications** can relieve pain, diarrhea, nutritional imbalance, or infection.
- **Hospitalization.** Some patients with severe diarrhea and bleeding become dehydrated and must be hospitalized. In the hospital, healthcare providers will stop the diarrhea and bleeding, give you fluids and nutrition, and adjust medications.
- **Surgery.** If other treatments don't reduce symptoms, or if side effects from the medications are too severe, your doctor may recommend surgery. About 25% to 40% of patients eventually need surgery. This usually means removing the entire colon and rectum.

You may need to wear a bag attached to your abdomen to collect stool (**colostomy bag**). Or, the doctor may make a pouch to attach to your anus, which lets you pass stool regularly. Because the colon normally absorbs water, having it removed may mean that you have several watery stools each day.

## What can I do?

### Watch your diet.

- Limit dairy products, or try using lactose-free dairy substitutes.
- Be careful with fiber. It may make your diarrhea and gas worse. Eating soft fruits and cooked vegetables may help.
- Eat small meals and drink plenty of water.
- Limit foods that make your symptoms worse.

**Manage stress.** Stress can affect your digestion and make your symptoms worse. Ask your doctor to help you set up an exercise plan.

**Physical Activity.** Ask your doctor about starting an exercise program. Physical activity can help relieve stress and improve GI health.

**Find support.** Ask your doctor for a referral to a mental health therapist, or a psychologist familiar with IBD. Consider joining a group with others who are dealing with IBD. Learn more about the disease at:

- IBD Support Foundation ([ibdsf.org](http://ibdsf.org))
- Crohn's and Colitis Foundation ([crohnscolitisfoundation.org](http://crohnscolitisfoundation.org))

## When should I call my doctor?

Check with your doctor if you have:

- Abdominal pain or blood in your stool
- Ongoing diarrhea that does not get better with over-the-counter medicine
- Unexplained fever of 101° F (38° C) or higher that lasts more than a few days

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