



Inflammatory Bowel Disease

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TDD: 1-888-220-5446

Q: What is inflammatory bowel disease?

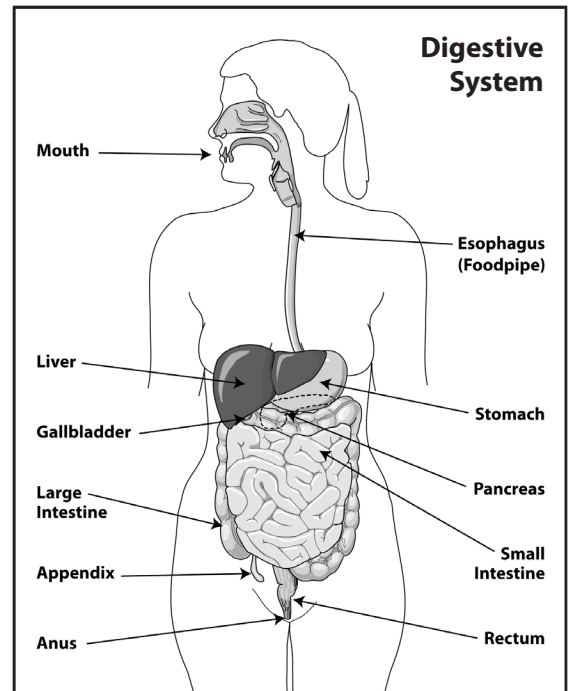
A: Inflammatory bowel disease (IBD) is the name of a group of disorders in which the intestines (small and large intestines or bowels) become inflamed (red and swollen). This inflammation causes symptoms such as:

- Severe or chronic (almost all of the time) pain in the abdomen (belly)
- Diarrhea — may be bloody
- Unexplained weight loss
- Loss of appetite
- Bleeding from the rectum
- Joint pain
- Skin problems
- Fever

Symptoms can range from mild to severe. Also, symptoms can come and go, sometimes going away for months or even years at a time. When people with IBD start to have symptoms again, they are said to be having a relapse or flare-up. When they are not having symptoms, the disease is said to have gone into remission.

The most common forms of IBD are ulcerative colitis (UHL-sur-uh-tiv koh-LEYE-tiss) and Crohn's (krohnz) disease. The diseases are very similar. In fact, doctors sometimes have a hard time figuring out which type of IBD a person has. The main difference between the two diseases is the parts of the digestive tract they affect.

Ulcerative colitis affects the top layer of the large intestine, next to where the stool is. The disease causes swelling and tiny open sores, or ulcers, to form on the surface of the lining. The ulcers can bleed and produce pus. In severe cases of ulcerative colitis, ulcers may weaken the intestinal wall so much that a hole develops. Then the contents of the large intestine, including bacteria, spill into the abdominal (belly) cavity or leak into the blood. This causes a serious infection and requires emergency surgery.



Crohn's disease can affect all layers of the intestinal wall. Areas of the intestines most often affected are the last part of the small intestine, called the ileum, and the first part of the large intestine. But Crohn's disease can affect any part of the digestive tract, from the mouth to the anus. Inflammation in Crohn's disease often occurs in patches,



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with normal areas on either side of a diseased area.

In Crohn's disease, swelling and scar tissue can thicken the intestinal wall. This narrows the passageway for food that is being digested. The area of the intestine that has narrowed is called a stricture (STRIK-choor). Also, deep ulcers may turn into tunnels, called fistulas (FISS-choo-luhss), that connect different parts of the intestine. They may also connect to nearby organs, such as the bladder or vagina, or connect to the skin. And as with ulcerative colitis, ulcers may cause a hole to develop in the wall of the intestine.

IBD is not the same as irritable bowel syndrome (IBS), although the symptoms can be similar. Unlike inflammatory bowel disease, IBS does not cause inflammation or damage in the intestines.

In many people with IBD, medicines can control symptoms. But for people with severe IBD, surgery is sometimes needed. With treatment, most people with IBD lead full and active lives.

Q: What causes inflammatory bowel disease?

A: No one knows for sure what causes inflammatory bowel disease (IBD). Experts think that abnormal action of a person's immune system may trigger IBD. The immune system is made up of various cells and proteins. Normally, the immune system protects the body from infections caused by viruses or bacteria. Once the infection has cleared up, the immune system "shuts off." But in people with IBD, the immune system seems to overreact to normal bacteria in the digestive tract. And

once it starts working, the immune system fails to "shut off." This causes the inflammation, which damages the digestive tract and causes symptoms.

IBD runs in families. This suggests that inherited factors called genes play a role in causing IBD. Experts think that certain genes may cause the immune system to overreact in IBD.

Stress and eating certain foods do not cause IBD. But both can make IBD symptoms worse.

Q: Can inflammatory bowel disease cause health problems in parts of the body other than the digestive tract?

A: Yes. Inflammatory bowel disease (IBD) can cause a number of problems outside of the digestive tract.

One common problem that occurs because of loss of blood from the digestive tract is anemia (uh-NEE-mee-uh). Anemia means that the amount of healthy red blood cells, which carry oxygen to organs, is below normal. This can make a person feel very tired.

Other health problems include:

- Arthritis and joint pain
- Weak bones and bone breaks
- Inflammation in the eye and other eye problems
- Liver inflammation
- Gallstones
- Red bumps or ulcers on the skin
- Kidney stones
- Delayed puberty and growth problems (in children and teens)
- In rare cases, lung problems



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Some of these problems are caused by poor absorption of nutrients. Others are due to inflammation in parts of the body other than the digestive tract.

Some of these problems get better when the IBD is treated. Others must be treated separately.

Q: How does a healthy digestive system work?

A: A normal digestive system breaks down food into nutrients. Nutrients include proteins, carbohydrates, fats, vitamins, and minerals. The body needs nutrients for energy and to stay healthy.

The digestive tract runs from the mouth to the anus. When you eat food, it goes from your mouth, down your esophagus, and into your stomach. From there, it goes into your small intestine, where the nutrients are absorbed into your blood. Leftover water and solid waste then move down into your large intestine, where most of the water is absorbed back into the blood. Solid waste leaves the body out of the anus as a bowel movement.

Q: How does inflammatory bowel disease interfere with digestion?

A: When the small intestine becomes inflamed, as in Crohn's disease, it is less able to absorb nutrients from food. These nutrients leave the body in the bowel movement. This is one reason why people with Crohn's disease don't get enough nutrients, along with not having much appetite. Also, the undigested food that goes into the large intestine makes water absorption harder. This causes a watery bowel movement, or diarrhea.

In ulcerative colitis, the small intestine absorbs nutrients as it should. But inflammation in the large intestine keeps it from absorbing water, causing diarrhea.

Q: Who gets inflammatory bowel disease?

A: Although inflammatory bowel disease (IBD) can occur in any group of people, it is more common among:

- People who have a family member with IBD
- Jewish people of European descent
- White people
- People who live in cities
- People who live in developed countries

Smoking also seems to affect a person's risk of getting IBD. People who smoke are more likely to develop Crohn's disease but less likely to develop ulcerative colitis.

Experts think that as many as 1 million people in the United States have IBD. Most people with IBD begin to have symptoms between the ages of 15 and 30.

Q: How is inflammatory bowel disease diagnosed?

A: If you think you have inflammatory bowel disease (IBD), talk to your doctor. She or he will use your health history, a physical exam, and different tests to figure out if you have IBD and, if so, which type.

