

## Proctitis

### What is proctitis?

Proctitis is inflammation of the rectum which results in the discharge of blood, mucus and pus. It is similar to ulcerative colitis but proctitis only affects the rectum, whereas ulcerative colitis can affect the rest of the colon as well. Both men and women are equally affected by ulcerative colitis and it is more common in white Europeans, and less common in people of Asian descent.

Proctitis can be a chronic condition with some patients being symptom free for long periods of time between flare-ups.

### What causes proctitis?

As in ulcerative colitis it is believed that an abnormal immune response is responsible for development of proctitis. Proctitis is relatively uncommon in Asian populations compared with Europe and North America. This suggests that an environmental factor, such as diet, may also be important.

### What symptoms does proctitis cause?

The principle symptoms are:

- Urgency to open bowels
- Bleeding-blood may be mixed with stool or mucus
- Frequent small volume stools
- Mucus or slime with the stools
- Constant desire to open the bowels, known as tenesmus

### How is proctitis investigated?

After taking a detailed clinical history in the clinic further tests are required.

Tests are required to confirm the diagnosis, and assess the extent and severity of the proctitis. As well as the visual appearance of the bowel proctitis is confirmed by the microscopic examination of tissue samples (biopsies) taken from the bowel.

- Rigid sigmoidoscopy - will be carried out in clinic. This test allows the doctor to look at the lining of the lowest part of the bowel by passing a small tube via the back passage.
- Colonoscopy- this allows the inside of the colon and rectum to be examined through a long flexible tube being inserted via the back passage and up into the colon. This test can be used to determine the amount of inflammation inside the rectum and colon. During the colonoscopy biopsies can be taken to help with confirm a diagnosis.
- Flexible sigmoidoscopy- this allows the doctor to look at the lower part of the bowel using a shorter flexible tube inserted via the back passage. Again inflammation can be assessed and biopsies taken. The whole of the colon is not seen using this test.

- Blood tests- blood tests may be taken to assess the severity of inflammation.
- Stool tests- in patients with diarrhoea, these are required to identify whether or not there is an underlying infection causing the symptoms.

### **How is proctitis treated?**

The treatment of proctitis is mainly medical. As the inflammation is located in the lowest part of the bowel drugs are usually best administered topically for maximum effect. These are given as suppositories, enemas or foam preparations.

The commonest drugs used are 5-ASA drugs which are anti inflammatory in the bowel and topical steroids.

Other immunosuppressive agents such as azathioprine, or biological agents- anti-TNF alpha antibodies such as infliximab, are rarely required in patients with proctitis.

Only in very rare cases is surgical treatment ever required.

Proctitis is a condition where sufferers can experience relapses; patients are usually seen at regular intervals at follow-up appointments.

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#### **What are the next steps?**

If you think you have this condition or any of these symptoms, you will need to seek medical advice.

#### **If you have private medical care or wish to pay to see a consultant:**

Take this factsheet along to your own GP and request a referral to one of our consultants.

#### **For more information or to make an appointment:**

Contact the Birmingham Bowel Clinic on 0845 241 7762 or email [enquiries@birminghambowelclinic.co.uk](mailto:enquiries@birminghambowelclinic.co.uk).