

Crohn's Disease

Crohn's disease is an ongoing non-infectious condition that causes inflammation of the digestive tract (also known as the gastrointestinal tract). It is a form of Inflammatory Bowel Disease.

Crohn's disease affects about one in every thousand people in the UK, and it is estimated that each year between 3,000 and 6,000 people will be diagnosed with it. Inflammation can occur anywhere in the digestive tract from the mouth to the anus. The part of the small intestine known as the ileum is the commonest site to be affected.

Other commonly affected areas include the colon and rectum as well as the back passage (anus) itself. All of the layers of the intestine can be affected with healthy sections of the bowel being found in-between sections of diseased bowel.

In chronic cases the inflammation can damage sections of the digestive system resulting in additional complications of narrowing the gut or abscesses.

The actual cause of Crohn's disease is unknown. There is a higher chance of developing it if there is a close family blood relation who also suffers from the condition. It affects both men and women equally. It is more common in the Caucasian population than in people of black or Asian decent.

It is believed that the immune system is responsible for the inflammation that occurs in Crohn's disease but what causes the abnormal immune response is not fully understood.

Symptoms of Crohn's Disease

Symptoms that are often associated with Crohn's disease include:

- Abdominal pain- often crampy- often worse after meals
- Loose frequent stools (diarrhoea)
- Passage of blood and mucus
- Weight loss
- Tiredness
- Abscess or infections or fistula around the anus
- Mouth ulcers

Crohn's disease is an inflammatory bowel disease; its symptoms can similar to other intestinal inflammatory conditions for example ulcerative colitis and even in its early stages with irritable bowel syndrome.

Other, but less common symptoms of Crohn's disease can include:

- Skin rash

- Painful and swollen joints
- Inflammation and irritation around the eyes

How is Crohn's Disease investigated?

The most common age to be diagnosed with Crohn's disease is between the ages of ten and forty; however a diagnosis can be confirmed at any age. Unfortunately there isn't a one-off test available to confirm a diagnosis of Crohn's disease.

Sufferers will need to undergo various tests and investigations prior to a diagnosis of the disease being made.

After undergoing an initial health assessment by a GP further investigations are normally arranged by a hospital consultant. These may include:

- Blood tests- blood tests can measure inflammation levels within the body, and whether there is an infection present.
- Stool tests- in patients with diarrhoea to identify whether or not there is an underlying infection causing the symptoms.
- Rigid sigmoidoscopy - may 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 colon. During the colonoscopy a biopsy can be taken to help with confirming 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.
- Barium meal and follow through. This test involves drinking some barium and taking xrays of the abdomen. This test is used to examine the small intestine, which cannot be seen during a colonoscopy.

- MRI enteroclysis- this is an investigation that involves an MRI scan to look at the small intestine. This test doesn't involve any x- rays.
- MRI- this test is very useful for looking at abscesses infections or fistulas around the bottom.
- CT scan- this test is very useful for looking at the small intestine and the colon. It is particularly useful for identifying inflammation in the bowel wall.

Treatments for Crohn's Disease

The treatment of Crohn's disease involves both medical and surgical treatments.

Medical treatments include:

- 5-ASA drugs which are anti inflammatory in the bowel
- Steroids
- Other immunosuppressive agents such as azathioprine
- Antibiotics
- Biological agents- anti-TNF alpha antibodies such as infliximab

Surgical treatments include removal of parts of the intestine (either the small or large bowel) affected by the disease known as resection.

Sometimes surgery can be used to widen narrowed areas caused by the Crohn's disease, this is known as stricturoplasty.

Intestinal surgery for Crohn's disease can often be carried out using a keyhole technique. Other surgical procedures for Crohn's disease can include the following:

- Right Hemicolectomy
- Ileocolic Resection
- Left Hemicolectomy
- Sigmoid colectomy
- Sub Total Colectomy
- Pan-Proctocolectomy
- Loop Ileostomy

For patients with infection, abscess or a fistula around their bottom surgery is often required to control drain out any pus and drainage tubes known as setons may be used.

Surgery itself cannot cure Crohn's disease but it can offer long periods of symptom relief/remission.

To find out more details about the surgical treatments available for Crohn's Disease please visit the Treatments section of our website.

If a diagnosis of Crohn's disease has been made, patients are strongly advised to give up smoking, if they haven't already. Smoking is a known risk factor for disease persistence and recurrence.

Crohn's disease is a condition where sufferers can experience relapses and longer-term follow-up with regular consultations is usually recommended.

Birmingham Bowel Clinic 2011

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.