

12 THINGS YOU NEED TO KNOW ABOUT INFLAMMATORY BOWEL DISEASE

IBD affects approximately 1 in 250 people*

1 The term inflammatory bowel disease is used to describe two chronic disorders Ulcerative colitis and Crohn's disease, both cause inflammation of the small and/or the large bowel. Both conditions can also affect parts of the body outside the bowel and may be associated with poor general health.

2 Ulcerative colitis is inflammation of the mucous membrane or superficial lining of the large bowel (the colon). Common symptoms are: diarrhea, rectal bleeding, passing mucus, abdominal pain and discomfort. There may also be fever, fatigue, lethargy, loss of appetite and, less commonly, weight loss. Symptoms and their severity depend on the length of bowel involved and the degree of inflammation.

3 Crohn's disease is inflammation of the full thickness of the intestine rather than just the superficial lining. Crohn's disease may affect any part of the gastrointestinal tract from the mouth to the anus. Common symptoms include: abdominal pain, diarrhea, fever, malaise, nausea and vomiting, loss of appetite, weight loss and poor growth in children.

4 The causes of IBD are not yet understood.

5 IBD does not necessarily get worse over time. Most people have symptoms intermittently. They have relapses in which their IBD 'flares up', and remissions with complete freedom from symptoms.

6 IBD can start at any age but commonly occurs in those aged between 15 and 30 years.

7 IBD affects approximately 1 in 250 people aged 5-49 nationally*, and each year more and more young people are being diagnosed.

8 IBD is not IBS. IBS is irritable bowel syndrome. It's not an inflammatory disease.

9 Australia has one of the highest rates of IBD prevalence and incidence in the world**.

10 IBD sufferers have a constant life-long and often hidden struggle that can affect their personal, social and work life.

11 Treatments include a range of drugs which treat inflammation. Sometimes surgery is also required when these treatments are proving ineffective. For Colitis patients surgery can involve removing the whole or part of the colon which may require a stoma and a colostomy bag. For those with Crohn's disease surgery may be required for acute complications and when medical therapy fails to control symptoms. However, because Crohn's disease tends to recur, as little bowel as possible is removed.

12 While there has been a lot of research done, as yet there is no known cure for Crohn's Disease, and the only way to cure Colitis presently is the surgical removal of the entire colon.

The Gut Foundation specialises in medical research to understand the causes of gut problems, better methods of prevention and treatment, and continually educating the public on the latest findings. For more information on IBD download The Gut Foundation IBD booklet from www.gutfoundation.com.au, or become a member.

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*PwC-report, Improving Inflammatory Bowel Disease care across Australia, March 2013. **Jarrad Wilson et al. 'High incidence of inflammatory bowel disease in Australia: A prospective population-based Australian incidence study', Inflammatory Bowel Diseases, Vol. 16, Issue 9, 2010 (Based on a sample population taken from the Geelong region).