

Patient Education Form

What You Should Know About Crohn's Disease

WHAT IS CROHN'S DISEASE?

Crohn's disease is a chronic inflammatory process primarily involving the intestinal tract. Although it may involve any part of the digestive tract from the mouth to the anus, it most commonly affects the last part of the small intestine (ileum) and/or the large intestine (colon and rectum). Crohn's disease is a chronic condition and may recur at various times over a lifetime. Some people have long periods of remission, sometimes for years, when they are free of symptoms. There is no way to predict when a remission may occur or when symptoms will return.

WHAT ARE THE SYMPTOMS OF CROHN'S DISEASE?

Because Crohn's disease can affect any part of the intestine, symptoms may vary greatly from patient to patient. Common symptoms include cramping, abdominal pain, diarrhea, fever, weight loss, and bloating. Not all patients experience all of these symptoms, and some may experience none of them. Other symptoms may include anal pain or drainage, skin lesions, rectal abscess, fissure, and joint pain (arthritis).

WHO DOES IT AFFECT?

Any age group may be affected, but the majority of patients are young adults between 16 and 40 years old. Crohn's disease occurs most commonly in people living in northern climates. It affects men and women equally and appears to be common in some families. About 20 percent of people with Crohn's disease have a relative, most often a brother or sister, and sometimes a parent or child, with some form of inflammatory bowel disease. Crohn's disease and a similar condition called ulcerative colitis are often grouped together as inflammatory bowel disease. The two diseases afflict an estimated two million individuals in the U.S.

WHAT CAUSES CROHN'S DISEASE?

The exact cause is not known. However, current theories center on immunologic and/or bacterial cause. Crohn's disease is not contagious, but it does have a slight genetic tendency. An x-ray study or direct evaluation of the intestines may be used to diagnose Crohn's disease.

HOW IS CROHN'S DISEASE TREATED?

Initial treatment is almost always with medication. There is no "cure" for Crohn's disease, but medical therapy with one or more drugs provides a means to treat early Crohn's disease and relieve its symptoms. The most common drugs prescribed are corticosteroids, various anti-inflammatory agents and immune system modulators.

In more advanced or complicated cases of Crohn's disease, surgery may be recommended. Emergency surgery is sometimes necessary when complications, such as **perforation** of the intestine, **blockage** of the bowel, or significant **bleeding** occurs. Other less urgent indications for surgery may include abscess formation, fistulas, severe anal disease or persistence of the disease despite appropriate drug treatment.

Not all patients with these or other complications require surgery. This decision is best reached through consultation with your gastroenterologist and your colorectal surgeon.

SHOULDN'T SURGERY FOR CROHN'S DISEASE BE AVOIDED AT ALL COSTS?

While it is true that medical treatment is preferred as the initial form of therapy, it is important to realize that surgery is eventually required in up to 75% of all patients with Crohn's. Many patients have suffered unnecessarily due to a mistaken belief that surgery for Crohn's disease is dangerous or that it inevitably leads to complications.

Surgery is not "curative", although many patients never require additional operations. A conservative approach is frequently taken, with a limited resection of intestine being the most common approach.

Surgery often provides effective long-term relief of symptoms and frequently limits need for medications such as steroids. Surgical therapy is best conducted by a physician skilled and experienced in the management of Crohn's disease.