Crohn’s Disease

Crohn’s disease is a chronic (ongoing) disorder that causes inflammation of the digestive or gastrointestinal (GI) tract. Although it can involve any area of the GI tract from the mouth to the anus, it most commonly affects the small intestine and/or colon. In Crohn’s disease, all layers of the intestine may be involved, and there can be normal healthy bowel in between patches of diseased bowel. There is no individual test that can definitively diagnose Crohn’s disease. To determine the diagnosis, your physician will evaluate the results of laboratory tests, X-rays and findings on endoscopy and pathology tests. Other testing may need to be performed to eliminate other conditions. It may take some time to come to the proper diagnosis because the symptoms of Crohn’s disease mimic those of other gastrointestinal disorders.

Crohn’s Disease Background Information

Crohn’s and a related disease, ulcerative colitis, are the two main disease categories that belong to a larger group of illnesses called inflammatory bowel disease (IBD). It is estimated that nearly half a million Americans have Crohn’s disease. The incidence of disease is similar with males and females. Crohn’s disease occurs primarily in individuals between the ages of 15-35. It can, however, affect individuals of all ages. Crohn’s disease is a chronic disease and is associated with a slightly increased risk of small intestinal and colorectal cancer.

Symptoms: Individuals with Crohn’s disease can experience any range of symptoms ranging from mild to severe. The symptoms will range in severity depending on whether or not the disease is in a period of remission or flare up. The more common symptoms an individual may experience are prolonged or bloody diarrhea, unexplained weight loss, fever and abdominal pain.

Risk Factors: Some of the most common risk factors are:

- Individuals are at a higher risk of developing Crohn’s disease if they have a family member with the disease. The risk is ten times greater if a person has a relative with the disease and thirty times greater if the relative is a brother or sister.
- Crohn’s disease affects certain ethnic groups more than others. The disease is also more prominent in Caucasians and African Americans.
- The environment is also thought to have some affect on increasing the risk of Crohn’s disease. For example, the incidence is higher in highly developed countries.
Follow-up and Treatment Options for Crohn’s Disease

Follow up and diagnosis of Crohn’s disease frequently requires an endoscopic examination by your physician. The endoscopic examination may include a colonoscopy and an endoscopy of the stomach and small intestine. The treatment for Crohn’s disease depends on the location and severity of disease, complications, and response to previous treatment. The goals of treatment are to control inflammation, correct nutritional deficiencies and relieve symptoms like abdominal pain, diarrhea, and rectal bleeding. The main treatment alternatives are drugs, nutrition supplements or surgery. Unfortunately, treatment can help control the disease, but there is no cure. Only a physician can determine the most appropriate treatment.

**Drug Therapy:** Medication is usually prescribed to help reduce inflammation. In addition, often times physicians will prescribe a drug to help suppress or modify the immune system and an antibiotic to treat bacterial overgrowth.

**Nutrition:** Attention to your diet will be instrumental in reducing symptoms and maintaining good nutritional status. Often times individuals with Crohn’s disease experience loss of appetite and have increased caloric needs. These individuals would benefit from the inclusion of a nutritional supplement to their diet. Soft and bland foods are also generally tolerated better than hot and spicy foods.

**Surgery:** When medication is no longer effective in controlling the symptoms of Crohn's disease, surgery may be recommended. Surgery may be useful in repairing fistulas or removing bowel obstructions. During these surgeries, the surgeon will remove the affected portion of the bowel and sew the two segments together, which is also known as bowel resection.

**Questions to Ask Your Healthcare Provider**

- What treatment do you suggest?
- What are the benefits of this type of treatment?
- What are the risks and side effects of this treatment option?
- Is there anything I should be doing or not doing during treatment?
- What are the steps after treatment?
- How should I manage my diet to reduce my symptoms?

**Sources for Additional Information**

- American Gastroenterological Association: [www.gastro.org](http://www.gastro.org)
- Crohn’s and Colitis Foundation of America: [www.ccfa.org](http://www.ccfa.org)
- National Institute of Health: [www.nih.gov](http://www.nih.gov)

The content on this handout is provided to you as general information and not intended as a diagnosis. Please consult with your physician regarding the essential details about your condition.