



Education

Diverticulitis

What is diverticulitis?

Diverticulitis is a problem that can happen if you have diverticula in your intestine. Diverticula are tiny pouches or weak areas that bulge out from the lining of the wall of the intestine. They look like small thumbs poking out of the side of the bowel. When you have diverticula in your intestines, it is called diverticulosis. When these pouches become inflamed, it is called diverticulitis. You are more likely to have these pouches as you get older.

How does it occur?

It appears that the main cause of diverticular disease is too little fiber in the diet. Fiber is the part of fruits, vegetables, and grains that the body cannot digest. Fiber helps make stools soft and easy to pass. It helps prevent constipation. When you have constipation, the muscles strain to move stool that is too hard. The high pressure causes the weak spots in the colon to bulge out and become diverticula.

Diverticulitis occurs when diverticula become infected or inflamed. Doctors are not certain what causes the illness. It may begin when stool or bacteria are caught in the diverticula.

What are the symptoms?

Symptoms of diverticulitis may include:

- alternating diarrhea and constipation
- severe cramps in your lower left side that come and go
- pain on the lower left side of the abdomen
- chills or fever
- nausea and vomiting
- rectal bleeding.

How is it diagnosed?

Your health care provider will review your symptoms and examine you. You may have the following tests:

- sigmoidoscopy (exam of the rectum and lower end of the large intestine with a thin, flexible, lighted tube)
- colonoscopy (exam of most of the intestine with a thin, flexible, lighted tube)
- barium enema or lower GI x-ray
- blood tests.

How is it treated?

For an attack of acute diverticulitis, you will probably be hospitalized. Depending on how bad the attack is, your treatment may include antibiotics, intravenous (IV) fluids, and nasogastric suction (a procedure that relieves pressure in the intestine).

If attacks are severe or frequent, you may need surgery. There are 2 types of surgery to correct the problem. In colon resection, the problem area of the colon is removed. The other type of surgery is a colostomy. A colostomy attaches part of the colon to an opening in the wall of the abdomen. Bowel movements then pass through this

opening instead of the rectum. They are collected in a bag outside the body.

After the colon heals, the colostomy can be reversed. This means that you will have a second surgery to rejoin the ends of the colon to each other and will no longer have a colostomy.

How long will the effects last?

Diverticulitis is usually mild and should respond well to antibiotics and changes in diet.

How can I take care of myself?

- Use a source of heat such as a hot water bottle for cramps.
- If you have diarrhea, drink liquids and avoid solid foods. Try to rest until the diarrhea stops. When your symptoms are gone, eat bland, low-fiber foods at first. Your health care provider will let you know when you should gradually begin eating a high-fiber diet.
- Take all the medicine prescribed by your health care provider. If you stop taking antibiotics when your symptoms are gone but before the scheduled end of treatment, the symptoms may return.
- If your symptoms worsen, contact your provider.

How can I help prevent recurrence of diverticulitis?

- Follow your health care provider's prescribed treatment.
- Eat regular, nutritious meals containing high-fiber foods, such as fruits, vegetables, and whole-grain foods. Many people find fiber supplements, such as Metamucil, Citrucel, or other psyllium products, to be helpful, but in a few cases they make constipation worse.
- Drink plenty of water.
- Watch for changes in bowel movements (from constipation to diarrhea).
- Get enough rest and sleep.
- Exercise as recommended by your provider.
- Do not eat indigestible seeds such as popcorn kernels. Avoid other foods that may get stuck in diverticula, such as sunflower seeds, sesame seeds, and nuts.
- Contact your provider if symptoms return.

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