



BASIC INFORMATION

DESCRIPTION

- Diverticulosis is the presence of small, shallow, sac-like depressions (diverticula) in the wall of the colon. These diverticula may be present without any symptoms. They occur in 30% to 40% of persons over age 50. They increase with each decade of life.
- Diverticulitis occurs when diverticula become infected or inflamed. It can be a serious and dangerous disorder.

FREQUENT SIGNS AND SYMPTOMS

Diverticulosis symptoms:

- No symptoms (usually).
- Mild cramping that comes and goes. Bloating or tenderness in the abdomen. Passing gas or bowel movements may relieve these symptoms.
- Constipation or diarrhea.

Diverticulitis symptoms:

- Pain in the abdomen that becomes constant. Pain may be disabling from the start or may not become disabling for several days.
- Areas of the abdomen become tender to the touch.
- Fever, chills, nausea, and vomiting.
- Blood in the stool.

CAUSES

Exact cause is unknown. A low-fiber diet is thought to be the main factor in developing diverticula. Why they become infected or inflamed is also unknown. It is possible that stool or bacteria are caught in the diverticula.

RISK INCREASES WITH

- Diet that does not have enough fiber.
- Constipation.
- Age over 50.
- Smoking. It is a risk factor for complications.

PREVENTIVE MEASURES

No specific preventive measures. To reduce risks, eat a high-fiber diet, exercise daily, avoid constipation, and don't smoke.

EXPECTED OUTCOMES

Most cases are mild, respond well to treatment, and have no recurrence. If complications occur, they can usually be treated successfully.

POSSIBLE COMPLICATIONS

- Intestinal bleeding or infections.
- Perforation, tear, or blockage of the intestines.
- Abscess (pus-filled, infected area).
- Peritonitis (colon inflammation).
- Recurrent attacks of diverticulitis.
- Fistula (abnormal opening in the body).



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider may do a physical exam and a digital rectal exam (a gloved, lubricated finger is inserted into the rectum). Questions will be asked about your symptoms and bowel habits. Medical tests may include blood and stool studies, x-ray or CT.
- If there are no symptoms, treatment may not be needed. For mild symptoms, treatment may include a change in diet and the use of stool softeners. For more severe symptoms, bed rest, drugs, hospital care, and surgery may be needed.
- Surgery may be done for complications. These include abscess, fistula, intestinal obstruction, perforation, or peritonitis. A part of the affected colon may be removed (resection) and the remaining sections rejoined. A colostomy involves creating a temporary hole (stoma) in the abdomen to remove stool.
- For self-care:
 - Try to have a bowel movement at the same time each day. Allow about 10 minutes, and don't strain.
 - Check your stool for bleeding. Ask your health care provider if a sample is to be taken to the medical office.
 - To relieve mild pain, use a heating pad.
- To learn more: National Digestive Diseases Information Clearinghouse, 2 Information Way, Bethesda, MD 20892; (800) 891-5389; website: www.digestive.niddk.nih.gov.

MEDICATIONS

- Antibiotics will be prescribed for infections.
- Stool softeners may be recommended.
- Don't take laxatives, unless prescribed for you.

ACTIVITY

If you have fever or severe pain, stay in bed. Resume normal activity as soon as symptoms improve.

DIET

Eat a diet that is high in fiber. Drink plenty of fluids.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of diverticular disease.
- Symptoms don't improve or they become worse.

Special notes:
