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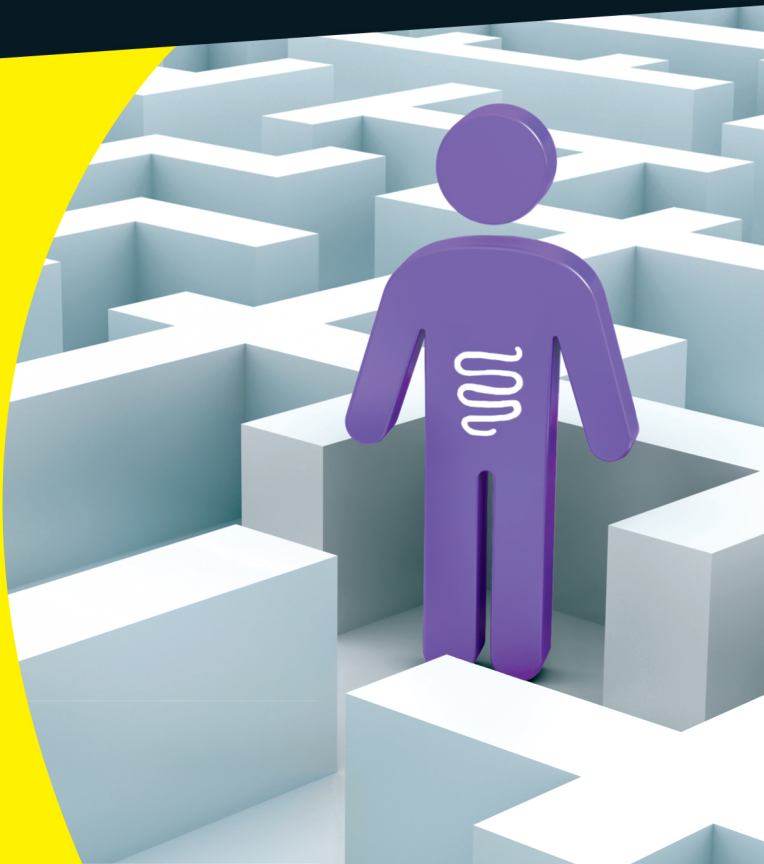
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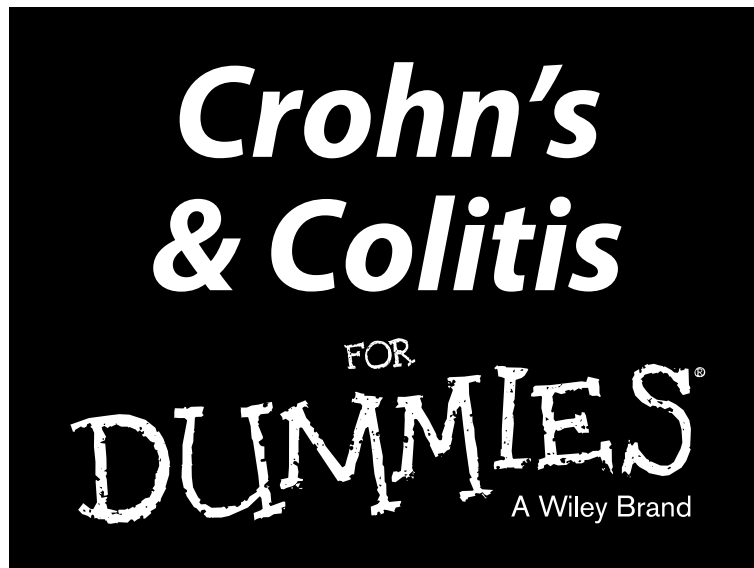
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About the Author

Dr. Tauseef Ali serves as a faculty member in the Department of Medicine, Section of Digestive Diseases and Nutrition, at the University of Oklahoma College of Medicine. He is the director of the department's comprehensive Inflammatory Bowel Disease Program and a staff gastroenterologist at OU Medical Center and St. Anthony Hospital, Oklahoma City. Dr. Ali graduated from Pakistan's King Edward Medical University, one of the most prestigious medical universities in Asia, established in 1860. He finished his internal medicine residency and gastroenterology subspecialty fellowship at the OU College of Medicine. During his training, Dr. Ali spent some time at the University of Chicago to learn about inflammatory bowel disease and received direct mentoring from Dr. David T. Rubin, an internationally renowned authority in Crohn's and colitis.

Dr. Ali has a great passion for inflammatory bowel disease and has presented many papers on the topic at the regional, national, and international levels. He has published many research and review articles on Crohn's and colitis. His areas of interest include the effect of sleep problems on inflammatory bowel disease and the impact of health literacy on disease outcomes.

As a member of the American College of Physicians, the American College of Gastroenterology, the American Gastroenterology Association, the American Society of Parenteral and Enteral Nutrition, the Southern Society of Clinical Investigators, and the Crohn's and Colitis Foundation of America, Dr. Ali is actively involved in many educational and scholarly activities. He has served as the academic editor-in-chief of *World Journal of Gastroenterology* and has been a reviewer in many gastroenterology journals.

Dr. Ali regularly tweets the latest research in Crohn's and colitis. You can find him at www.twitter.com/ibdtweets.

Dedication

To my wonderful parents, Rizwana and Asghar; my beautiful wife, Ammara; and my lovely kids, Mohid, Moiz, and Anaya, who were a constant support and source of fun and inspiration while I was working on this book.

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Foreword

When I started my training in gastroenterology, most people I met had never heard of Crohn's disease or ulcerative colitis. Today, I rarely meet anyone who hasn't heard of these conditions, and most people today know someone who suffers from them. This is due, in part, to the fact that the number of new cases of Crohn's disease and ulcerative colitis is rising in North America and around the world, and we don't yet know why. In addition, most inflammatory bowel disease (IBD) patients have no family history of IBD and no idea why this mysterious illness is affecting them. IBD is a substantial source of physical suffering and psychological distress, and until recently, it was often thought to be uncontrollable.

Today, we no longer think of IBD as uncontrollable. In the last decade, unprecedented advances have been made in the diagnosis and treatment of Crohn's disease and ulcerative colitis. We have made substantial progress in the understanding of the genetic, environmental, and immunological causes of these conditions, have created new technologies that aid in accurate diagnosis and disease assessment, and most important, have developed many new therapies that are effective at controlling bowel inflammation and improving patients' quality of life. In fact, IBD has moved from a dreaded and life-threatening disease of "crisis management" to a chronic, manageable condition whose management is now focused on prevention of complications and long-term, stable control.

Unfortunately, many patients are still misinformed or do not have access to expert care. The Internet is full of misinformation, and many physicians have had difficulty keeping up with the latest developments in the field. In *Crohn's & Colitis For Dummies*, Dr. Tauseef Ali skillfully addresses these unmet needs. As an IBD expert, he provides some of the latest theories and advice about disease management. And as a caring and experienced physician, he addresses the educational needs of patients and their family members.

Dr. Ali applies the tried-and-true formula of the *For Dummies* series to Crohn's disease and ulcerative colitis, and succeeds in breaking down complex and confusing symptoms and concepts into easy-to-understand

chapters, well-defined terms, and myth-busting explanations. When you read this book, you feel Dr. Ali's calming and compassionate presence, gently guiding you and providing straightforward advice and information. It's obvious why having a dedicated physician like him in your corner can make a huge difference in your disease management and good health.

So, until we have cures for Crohn's disease and ulcerative colitis, all patients and their family members should have a copy of *Crohn's & Colitis For Dummies!*

David T. Rubin, MD
Professor of Medicine
Co-Director, Inflammatory Bowel Disease Center
The University of Chicago Medicine

Introduction

Millions of people suffer from inflammatory bowel disease (IBD) around the world: more than 1 million in the United States, nearly 200,000 in Canada, and approximately 2 million in Europe. The incidence of this disease is on the rise. Some recent studies suggest that more than 30,000 people are diagnosed with IBD every year in the United States alone. Crohn's disease and ulcerative colitis, the two major types of IBD, are chronic inflammatory diseases of the intestine. They're thought to occur because of a malfunctioning of the immune system, genetic defects, or exposure to certain environmental factors — or perhaps a combination of all three. Crohn's disease and ulcerative colitis mostly affect younger people. There is no miracle drug to cure IBD, but many treatment options can provide relief.

About This Book

In this book, I don't tell you everything there is to know about Crohn's disease and ulcerative colitis. Instead, I give you the information you need in order to make the right decisions about your treatment. I've also made sure that the information I provide is clear and easy to understand — not a bunch of medical mumbo-jumbo. In this book, you find out what happens in Crohn's disease and ulcerative colitis — the symptoms they can cause, how they can affect your life at home and at work, what you can do to feel good and function normally, and how you can protect yourself and your family against the long-term unpredictability of the disease. I also offer useful tips, introduce you to the members of your healthcare team, and point you in the direction of other useful resources.

There's nothing wrong with reading this book from beginning to end, but you don't have to do that to get the most out of this book. Instead, you can use this book as a reference, drawing on the Table of Contents and Index to locate the information you need.

Conventions Used in This Book

I don't use many special conventions throughout this book, but I do use a few that you should be aware of:

- ✓ When I mention a drug, I list the generic name first, followed by the brand name(s) in parentheses.
- ✓ When I refer to Crohn's disease, sometimes I just call it *Crohn's*. And when I refer to ulcerative colitis, sometimes I just call it *colitis*. Anytime I refer just to *colitis*, know that I'm talking about ulcerative colitis. (Other types of colitis exist; see Chapter 2 for more information.)
- ✓ When I introduce a new term, I use *italics* and define the term shortly thereafter, often in parentheses.
- ✓ All web addresses appear in monofont.

Note: When this book was printed, some web addresses may have needed to break across two lines of text. If that happened, rest assured that we haven't put in any extra characters (such as hyphens) to indicate the break. So, when using one of these web addresses, just type in exactly what you see in this book, pretending as though the line break doesn't exist.

What You're Not to Read

You can skip two types of text without missing crucial information:

- ✓ **Sidebars:** These shaded gray boxes include information that may interest you but isn't critical to your understanding of the subject at hand.
- ✓ **Anything marked by the Technical Stuff icon:** For more information on the Technical Stuff icon, see "Icons Used in This Book," later in this Introduction.

Foolish Assumptions

Every book is written with a specific audience in mind, and this one is no different. As I wrote this book, I made some basic assumptions about who you are. One or more of the following likely applies to you:

- ✔ You have Crohn's or colitis, think that you may have it, or have a friend or family member who has it.
- ✔ You want information that can help you or a loved one manage Crohn's or colitis more effectively.
- ✔ You want information on the latest treatment for Crohn's or colitis.
- ✔ You want to work with your doctor to obtain the best possible care — and, yes, you sort of want to impress her with your knowledge.
- ✔ You want to take charge of your own body.
- ✔ You like books with black-and-yellow covers.

How This Book Is Organized

I've divided this book into six parts, so you can skip directly to the ones that pique your interest. Here's a brief overview of each part.

Part I: The Who, What, and Why of Crohn's and Colitis

Your doctor may have delivered the news that you or a loved one has Crohn's or colitis. Or maybe he said you *might* have this disease or *probably* have this disease. You may be wondering and trying to figure out what it means to you and your loved ones. This part gives you the big picture. Chapter 1 describes how this illness can affect your daily living and how to cope and live with this disease. Chapter 2 gives you the details about Crohn's and colitis, defining and explaining various signs and symptoms, as well as organ systems involved with the diseases. Chapter 3 takes you on a tour of the wonderful and amazing human digestive system and introduces you to the different parts of your digestive organs. Chapter 4 sheds light on how and why people get Crohn's or colitis, explaining various factors such as diet, environment, genes, and the immune system and their roles in causing Crohn's and colitis.

Part II: Getting Medical Help

Developing a long-lasting relationship with your doctor is critical in dealing with Crohn's or colitis. In Chapter 5, I help you find the right doctor and

assemble your healthcare team to manage your Crohn's and colitis. I also guide you on what questions to ask your doctor and how to manage your health records and keep them straight for your and your doctor's ease. In Chapter 6, I explain the different tests and investigations that are commonly performed to diagnose Crohn's and colitis. Chapter 7 covers the different medications used to treat these diseases, how they work, and their common side effects. When medications fail to control the disease, surgery is the next step; Chapter 8 describes various surgeries, when they may be right for you, and potential complications they bring.

Part III: Healing and Dealing with the Disease

In this part, I aim to give you power over your Crohn's and colitis. Chapter 9 covers nutrition, which plays an important part in your well-being. Although Crohn's and colitis put you at risk for malnutrition, deficiency of nutrients can also adversely affect your immune system and healing process. I fill you in on the importance of nutrients and provide details about their functions, how to get them, and their importance in the management of Crohn's and colitis.

Prevention is better than cure, and in Chapter 10 I discuss important preventive steps that are important to keep you healthy as a person with Crohn's or colitis. I also talk about vaccinations, bone scans, and skin care in this chapter.

Chapter 11 deals with alternative and complementary therapies, including the role of different herbs in treating these diseases. I also tell you about worm therapy, the latest hype in the management of Crohn's and colitis.

Part IV: Living and Coping with Crohn's and Colitis

Having Crohn's or colitis can make you feel isolated, embarrassed, and afraid. It can greatly affect how you interact with your family, your co-workers, your friends, and the world at large. Chapter 12 helps you face the diagnosis and live a happy life, despite your disease. Chapter 13 describes different triggers that you can avoid to prevent flares. Chapter 14 offers tips and techniques for working and traveling with Crohn's or colitis.

Part V: Considering Special Populations with Crohn's and Colitis

In Chapter 15, I describe various issues related to kids and teens who've been diagnosed with Crohn's or colitis. I also provide tips for surviving school and college — at least when it comes to these diseases. (I can't offer any advice on getting a date to the prom or making it to that 8 a.m. class.)

Getting pregnant with Crohn's and colitis is an important issue, and I devote Chapter 16 to this topic. In this chapter, I also fill you in on which Crohn's and colitis drugs are safe to take during pregnancy and while breastfeeding.

Part VI: The Part of Tens

Could there be a *For Dummies* book without a Part of Tens? Not a chance. In this part, I give you some pearls of wisdom — they're small, but worth a fortune. In Chapter 17, I fill you in on ten myths about Crohn's and colitis and give you a better and more accurate picture of the facts. In Chapter 18, I tell you about ten great resources for more information about Crohn's and colitis.

Icons Used in This Book

Icons are a handy *For Dummies* way to catch your attention as you slide your eyes down the page. They can help you pick out the key ideas and points of information throughout the book. The icons come in several varieties, each with its own special meaning:



The Remember icon marks information you'll want to, well, remember.



When my inner geek comes out, I mark the information with the Technical Stuff icon. Text marked with this icon provides information that's interesting but not critical to your understanding of the topic at hand.



The Tip icon marks time-saving and stress-saving information that you can use to improve your life when you have Crohn's or colitis.



The Warning icon alerts you to some pitfalls. I save this icon for critical issues, material important enough that could bring harm your way if you don't heed it.

Where to Go from Here

You can dive in anywhere that interests you and get valuable information. Use the Table of Contents and Index to find the information you need. If you aren't sure where to start, you can't go wrong with Part I.

No matter where you choose to begin, begin now! In your hands, you hold the information you need to live well with Crohn's and colitis.

Part I

The Who, What, and Why of Crohn's and Colitis

The 5th Wave

By Rich Tennant



"I can't believe her Crohn's disease is affecting her body any worse than her sense of style is."

In this part . . .

When you're new to Crohn's and colitis — either your own diagnosis or the diagnosis of a loved one — you may be overwhelmed. Your head is spinning with questions. And this part is for you. Here you find out what Crohn's and colitis are, how your digestive system works, and who gets these diseases and why.

Chapter 1

Crohn's and Colitis One Step at a Time

In This Chapter

- ▶ Finding out about Crohn's disease and ulcerative colitis
 - ▶ Reviewing the treatment options
 - ▶ Taking control of your quality of life
 - ▶ Living a full life with Crohn's and colitis
 - ▶ Looking at issues specific to pregnancy and kids
-

Knowing your disease is key to your quality of life. Knowledge is power! While I was writing this book, I thought about the questions I hear most often from my patients and their family members. I answered those questions just as I do for my patients. This chapter is an overview of the book as a whole — it gives you a taste of what I elaborate on in the chapters that follow.

Knowing Crohn's and Colitis

Crohn's and colitis are chronic inflammatory diseases of the intestines. Together, these illnesses are also known as *inflammatory bowel disease*. So, what exactly are Crohn's and colitis?

When you get a cut to your skin, it hurts, bleeds, swells, and eventually forms a scar. Similarly, Crohn's and colitis cause cuts inside your intestinal wall; these cuts are called *ulcers*. Pain, bleeding, and swelling occur with ulcers, too — they just happen inside your intestinal wall where you can't see them. Eventually, scars form (just as you might have a scar from a bad cut on your skin), leading to the formation of *strictures* (abnormal narrowing) and causing obstruction. This happens more frequently in Crohn's disease and rarely in ulcerative colitis. In Chapter 2, I offer even more information on what Crohn's and colitis are.

The signs and symptoms of Crohn's and colitis (also covered in Chapter 2) depend on the part of the intestines involved:

- ✔ **Crohn's disease:** Crohn's disease most commonly involves the last part of the small intestine and the beginning of the large intestine. The common symptoms of Crohn's disease are abdominal pain, especially on the right lower side of the abdomen, diarrhea, and weight loss.
- ✔ **Colitis:** Colitis can involve the whole large intestine or a part of it. The process of inflammation usually starts in the rectum and moves upward to involve other parts of the colon. Bloody diarrhea is a common symptom of colitis. *Urgency* (the sudden feeling of needing to have a bowel movement) and *tenesmus* (the feeling of incomplete relief after the bowel movement) are also common symptoms and are caused by the inflammation of the rectum, also known as *proctitis*.

In both diseases, the process of inflammation can also cause fever, loss of appetite, weight loss, night sweats, and fatigue. Your nutritional status is usually compromised and if you don't pay attention to your diet and calorie intake, you can easily become malnourished.

If it's been a while since you took a biology class and you need a refresher course on the digestive system, check out Chapter 3.

Who gets Crohn's and colitis? We still don't have the exact answer to this question. Scientists believe that different factors may play a role in causing these illnesses — including malfunctioning of the immune system, genetic defects, or exposure to certain environmental factors. For more information on who gets Crohn's and colitis, turn to Chapter 4.

Getting the Treatment You Need

The first part of getting treated for Crohn's disease is assembling your health-care team. Crohn's and colitis are lifelong diseases, so you want to choose a doctor you can trust and with whom you can develop a long-term relationship. You also need to be familiar with other key players of your healthcare team, such as nurses, nutritionists, psychiatrists, and surgeons. For more information on assembling your team, turn to Chapter 5.

When it comes to getting diagnosed with Crohn's or colitis, most of the time it's symptoms of diarrhea, abdominal pain, and blood in stools that prompts people to go to the doctor's office. Your doctor will run a battery of tests to rule out (or rule in) the diagnosis of Crohn's or colitis. These tests may include blood tests, stool tests, endoscopic exams, and radiology tests. The different tests used to confirm the diagnosis of Crohn's or colitis are covered in Chapter 6.