

Diverticular Disease

What is Diverticular Disease?

Diverticular disease is a benign (non cancerous) condition of the colon (large intestine or 'bowel'). It is also known as diverticulosis and consists of small pockets (diverticula) that bulge out of the colon, through its muscle wall. When the pockets or diverticula get inflamed the resulting condition is known as diverticulitis.

Incidence

Diverticular disease is rare before 30 years of age and increases with age. Approximately one third of the population over the age of 60 and half of those aged between 80 and 90 years have diverticulosis. Females are often more affected than males.

Diverticulitis

Most people with diverticular disease have no symptoms and it is diagnosed 'incidentally' with a colonoscopy or a CT scan. The diverticula, however, can become inflamed and this is called diverticulitis. People with diverticulitis often present with lower abdominal pain, fever and generally a change in bowel habit (either constipation or sometimes diarrhoea).

The diagnosis of diverticulitis is made with a CT scan. A mild attack of diverticulitis can be treated as an outpatient but sometimes admission to hospital is required, with or without antibiotics depending on the condition of the patient.

Severe cases of diverticulitis can result in peritonitis (that usually requires emergency surgery), an abscess (that usually requires drainage) or a fistula, which is an abnormal communication between the bowel and another structure such as the bladder (that usually requires surgery).

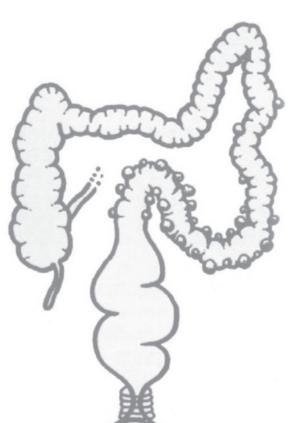
Most diverticulitis that is not considered severe can be managed without surgery. Colonoscopy may be required about 6-8 weeks after the attack if there is confusion about the diagnosis.

Bleeding

Occasionally a diverticula can bleed. These bleeds tend to be rather dramatic but most often stop on their own accord. Often due to the large nature of these bleeds hospitalisation is needed. Blood products are given if required. If the bleeding doesn't stop on its own either a colonoscopy, angiography with embolization (xray of the vessels with a 'plug' in the bleeding vessel) or surgery may be required.

Prevention

While it appears difficult to prevent diverticular disease forming, a high fibre diet is recommended to decrease the risk of another attack for people that have had diverticulitis.



Colorectal Surgical Society of Australia and New Zealand (CSSANZ)

Members of the Society are surgical specialists practising exclusively in colorectal surgery - the management of diseases of the large bowel (colon), rectum, anus and small bowel. After completing general surgery training they have completed a further period of training and research in colorectal surgery. The Society's mission is the maintenance of high standards in colorectal surgery and colonoscopy in Australia and New Zealand through the training of colorectal surgeons and the education of its members, and to promote awareness, prevention and early detection of colorectal diseases in the community.

The CSSANZ Foundation is a trust with a board of governors whose objective is to support high quality research projects for colorectal surgeons in training and our members. Donations to the CSSANZ Foundation are fully tax deductible in Australia and can be sent to:

CSSANZ Foundation Pty Ltd Suite 6, 9 Church St, Hawthorn, VIC 3122, Australia