Ileoanal Pouch Surgery
For Ulcerative Colitis
What Is Ulcerative Colitis?

Ulcerative colitis is inflammation (irritation and swelling) of the digestive tract. Ulcerative colitis affects the rectum and the colon (large intestine). Symptoms may include stomach cramps or diarrhea, often after meals. No one knows the exact causes of ulcerative colitis. But it can be treated. Work with your doctor. As a team, you can control ulcerative colitis so you can live a full life.
Discuss Your Treatment Options with Your Doctor

Your doctor can discuss your treatment options. Treatments such as medications and lifestyle changes ease symptoms and help you stay active. If these options don’t work for you, surgery is an option. Surgery can relieve symptoms and, in most cases, cure ulcerative colitis. Having surgery is a decision you will make with your doctor.

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The Digestive Tract at Work
The digestive tract starts at the mouth and ends at the anus. After you chew and swallow food, the stomach turns it into a liquid. The liquid then moves through the small intestine. This is where nutrients are absorbed. Next, the large intestine removes water and salts from the liquid. This helps form a solid stool. Stool is then stored in the rectum. Finally, stool leaves the body through the anus.

A Healthy Digestive System

The esophagus carries food from the mouth to the stomach.

The stomach breaks down food into a liquid mixture.

The small intestine absorbs nutrients after foods have been turned into a liquid by the stomach.

The ileum is the last part of the small intestine. Digested food passes from the ileum to the colon as liquid waste.

The large intestine (colon) absorbs water and minerals such as salt, forming a solid stool.

The rectum stores stool until a bowel movement occurs.

The anus is the opening where stool leaves the body.

A healthy intestine has smooth inner and outer layers.

Normal layers of the colon
Ulcerative colitis often starts with inflammation and small sores. It affects just the lining (innermost layer) of the rectum and colon. It can cause many problems within the digestive tract. The inflammation may lead to cramps, diarrhea, and blood in the stool. Symptoms may vary from person to person.

Ulcerative Colitis Symptoms

Most symptoms of ulcerative colitis relate to bowel movements. Often, the first symptom is increasingly loose stools over time. Here are some other common symptoms:

• Several loose bowel movements a day
• Blood and pus in the stool
• Rectal bleeding
• Feeling of incomplete bowel movement
• Urgency (sudden feeling that you need to have a bowel movement right away)
• Severe straining with bowel movements
• Joint pain
• Rectal pain that comes and goes
Medications

To control your symptoms and improve your quality of life, medication may be tried first. Medication won’t cure ulcerative colitis. But it can help keep the disease from slowing you down. Work closely with your doctor. Your medication or dosage may need to be changed if you have certain side effects or if your symptoms change.

Anti-Inflammatories

Special anti-inflammatories treat the lining of the intestine. These medications can reduce inflammation and discomfort. But they’re not like aspirin or other over-the-counter medications. They must be prescribed by a doctor.

The most common anti-inflammatories for ulcerative colitis are called 5-ASA compounds. They can help control symptoms over long periods of time. 5-ASA compounds may be taken as pills. But they also can be taken as an enema or suppository (the medicine is put directly into the rectum).

The 5-ASA compound prescribed most often is in the “sulfa” family. Your doctor will explain its side effects to you. Some of them include:

- Headache
- Upset stomach
- Vomiting
- Skin rash

Less common but more severe side effects may include fever and heart or liver problems. Severe side effects can be a sign of a sulfa allergy. If you have a sulfa allergy, your medication may need to be changed. Your doctor will explain the side effects and other details of any new medications you may need to take. Call your doctor if your side effects become severe.
Corticosteroids

Your doctor may prescribe corticosteroids to reduce inflammation. Unlike 5-ASA compounds, corticosteroids are usually taken for short periods only. They shouldn’t be taken in remission (a long period without severe symptoms). Taken over time, they can cause severe side effects. They also may put you at risk for diabetes (a blood sugar problem). Your doctor will watch you for:

**Short-Term Side Effects**
- Mood changes
- Trouble sleeping
- Weight gain
- Changes in body shape
- Puffy face or acne

**Long-Term Side Effects**
- Bone loss or fractures
- Eye problems
- Facial hair (women)
- Stretch marks
- High blood pressure

Handling Side Effects

You and your doctor will discuss side effects. In most cases, side effects are easy to manage. But sometimes they can become severe enough that you need to change medication. Call your doctor if you’re having trouble managing. Also call if you’re having any side effects that are unexpected.

Other Medications

**Immunosuppressives** treat the part of your body that fights disease (the immune system). By treating the immune system, inflammation may be reduced. Immunosuppressives can be taken for long periods. But you may need to see your doctor more often than usual for monitoring.

**Antibiotics** fight the bacteria that can lead to infections. In some cases, antibiotics also help reduce inflammation.
Lifestyle Changes

Along with medications, lifestyle changes can help control your symptoms. These changes may continue to help you after surgery.

Have a Plan

Make this your goal: Ulcerative colitis won’t keep me from activities I enjoy. You may need to do some planning to reach that goal. But by staying positive, you can help make sure you’re in control—not ulcerative colitis. Here are some other tips:

- Know where to find clean bathrooms.
- Eat more small meals instead of three big meals, especially when on the road or when you don’t have easy access to bathrooms.
- If you’ve had a recent flare-up, eat foods that you know will limit your symptoms. Keep those foods on hand, both at home and at work.
- Get some exercise every day.
- Take a stress reduction class.
- If going on a long trip, discuss your plans with your doctor. He or she can teach you what to do if you have a flare-up while on the road.

Avoid Your Problem Foods

Some foods may make symptoms worse. Keeping track of your “problem foods” may be helpful. Ask your doctor any questions you have about healthy eating.

There’s no rule for which foods can be a problem. How you feel after eating them is the best guide. You may need to avoid high-fiber foods and foods that are hard to digest. These can include fresh fruits and vegetables. High-fat foods, such as whole-milk dairy products and red meat, also can worsen symptoms in a flare-up.

Write down what you eat and how it affects you. If one kind of food often gives you trouble, stay away from it. Also note the foods that work well for you.

Your doctor may have you see a nutritionist to come up with the best food choices for you. A nutritionist can help ensure that you eat foods that are “safe” while getting proper nourishment.

<table>
<thead>
<tr>
<th>Foods That Are Often “Safe”</th>
</tr>
</thead>
<tbody>
<tr>
<td>No two people respond the same to all foods. But these choices are often “safe” to eat during a flare-up:</td>
</tr>
<tr>
<td>- Tuna packed in water</td>
</tr>
<tr>
<td>- Skinless chicken</td>
</tr>
<tr>
<td>- White rice</td>
</tr>
<tr>
<td>- Baked potato (no skin)</td>
</tr>
<tr>
<td>- Mashed potatoes</td>
</tr>
<tr>
<td>- Plain pasta</td>
</tr>
<tr>
<td>- Instant oatmeal</td>
</tr>
<tr>
<td>- Canned peaches or pears</td>
</tr>
<tr>
<td>- Applesauce</td>
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<tr>
<td>- Flavored gelatin</td>
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Considering Surgery

Many patients decide on surgery when other treatments don’t work well enough for them. Ileoanal pouch surgery will cure your ulcerative colitis, so you no longer have symptoms. Whether or not to have this surgery is a choice for you to make with your doctor.

Ileoanal Pouch

This surgery cures ulcerative colitis. Removing the rectum and colon gets rid of all digestive tract symptoms.

- The colon and rectum are removed.
- The anus and surrounding muscles are left in place.
- Part of the small intestine is reshaped to form a pouch within the body. The pouch works like a rectum. It stores waste until a bowel movement occurs.

When healed: Bowel movements still occur through the anus.

Temporary Ileostomy

A temporary ileostomy may be needed while the intestine heals after the pouch surgery. If an ileostomy will be used, the surgeon creates a stoma (opening) in the abdominal wall. The small intestine is connected to this opening. This lets waste pass into a pouch outside the body. When the intestine has healed, the small intestine is disconnected from the stoma. Waste will then pass out of the body through the anus. The hole in the abdominal wall will close up and heal.

Risks and Complications of Surgery

Surgery for ulcerative colitis has certain risks and complications. Your doctor will discuss them with you. They may include:

- Infection
- Injury to nearby organs
- An anastomosis that leaks
- Blood clots
- Risks related to anesthesia
Having Surgery

You need to know what to expect before, during, and after surgery. Follow all instructions you are given for how to prepare for surgery. This can help limit problems during and after surgery. You may recovery in the hospital for a week or longer after the procedure. Once out of the hospital, recovery may take several more months.

Preparing for Surgery

Preparation may begin a few weeks before surgery. It will likely include the following:

- If you smoke, try to quit.
- Tell your doctor about any medications you take. You may need to stop taking some of them before surgery.
- If you will have a temporary stoma, a specially trained healthcare provider called an enterostomal therapy (ET) nurse may meet with you.
- If instructed, stop eating solid food a day or two before surgery. Switch to a diet of clear liquids such as broth.
- Don’t eat or drink after midnight the night before surgery. This includes water, gum, and breath mints.
- Use an enema or laxative as directed by your doctor.
- If your doctor tells you to take medication the morning of surgery, swallow it with only small sips of water.
Recovering from Surgery

After surgery, you’ll be moved to a recovery area. A doctor or nurse will give you medication to ease any discomfort. While in recovery, you’ll be closely monitored. Soon you’ll be moved to another room.

Try to get up and walk around as soon as you can. This helps you heal faster. Gentle movement can improve digestive function. Walking also helps your heart and lungs. And it can keep clots from forming in your legs.

During the first few days, you’ll get nutrition through an IV tube. You may have a nasogastric tube at first to keep your stomach empty. It can help your digestive tract heal. You also may meet with an ET nurse. He or she will teach you how to care for the stoma as you heal.

Getting Back to Normal

Stay positive. That’s a great way to help your recovery. Depending on your surgery, even mild activity can make you tired in the first few weeks or months.

• Stay active. But avoid hard exercise and heavy lifting in the first month.
• You can walk, climb stairs, shower, and bathe soon after surgery. But don’t drive until your doctor says you can.
• Follow all special diet instructions.

After a few months, you may be feeling back to normal. For many people, it’s well worth the wait. They often have more energy and confidence than they’ve felt in years.

When to Call Your Doctor

Call your doctor right away if you notice any of these symptoms or any other symptoms that concern you:

• Fever
• Nausea
• Vomiting
• Redness, swelling, or pain near the incision
• Constipation, diarrhea, or bloating
• Difficulty controlling bowel movements
Finding Support

A support group can help you with many concerns you may have. Other people have felt much of what you may be feeling. Just knowing that you’re not alone can be a great comfort. Also check out the organizations listed below. They can give you more information.