

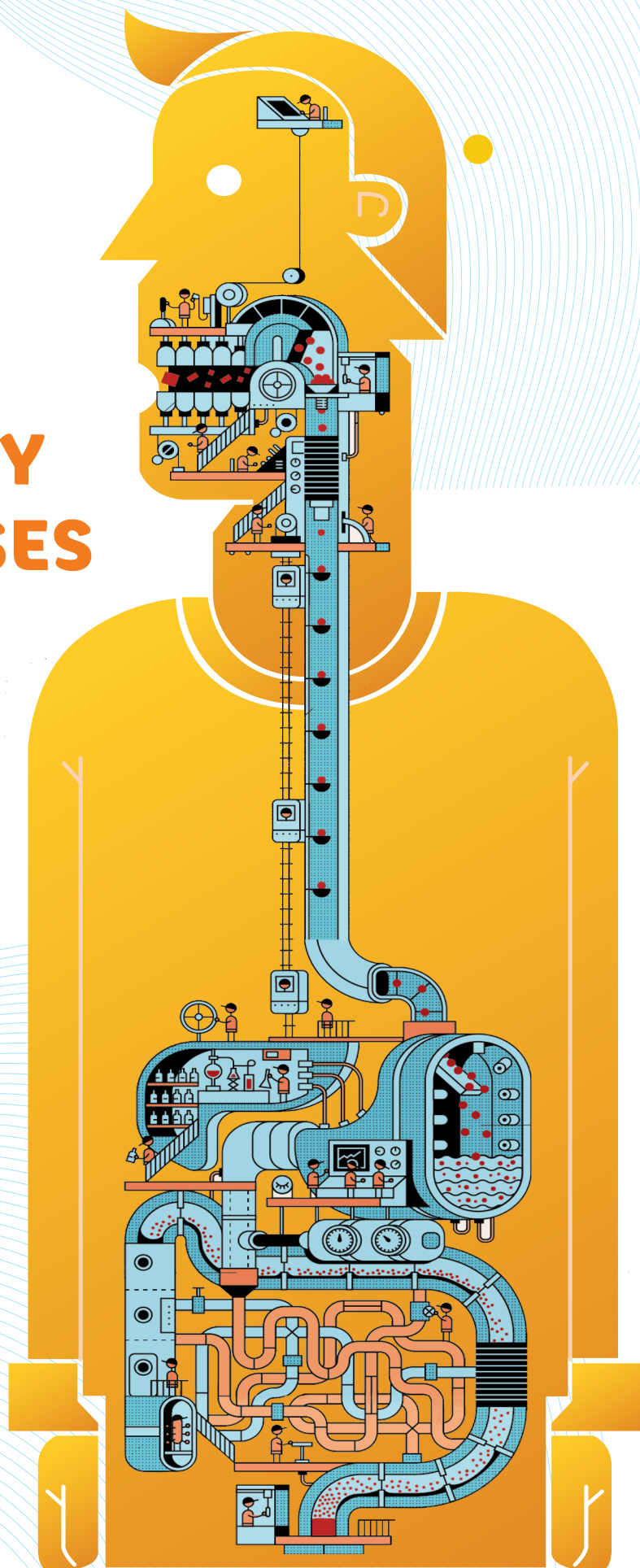
LIVING WITH INFLAMMATORY BOWEL DISEASES

 CROHN'S & COLITIS
SOCIETY OF SINGAPORE

Information published in this e-pamphlet will be useful for families of patients diagnosed with Crohn's Disease or Ulcerative Colitis who would like to understand more about the conditions.

The information is for educational purposes only. It is not intended to be a substitute for professional medical advice.

Always consult your doctor regarding your medical condition.



About IBD

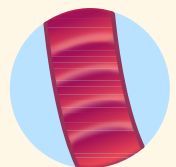
Inflammatory bowel disease (IBD) consists of **Crohn's Disease (CD)** and **Ulcerative Colitis (UC)**. These conditions disrupt your body's ability to digest food, absorb nutrition, and eliminate waste in a healthy manner.

They are lifelong conditions, but that doesn't mean you will always feel unwell. Treatment such as medicines and surgery can help you feel a lot better.

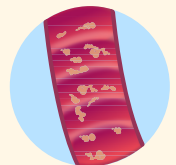
Crohn's Disease ^{1,2}	Ulcerative Colitis ¹
Crohn's Disease is inflammation anywhere in the gut, from your mouth to your anus. The most common parts affected are the terminal part of the small intestine and the large intestine.	Ulcerative Colitis is inflammation and ulcers in the large intestine. It can be anywhere from your colon to your anus.
All layers of the gut can be inflamed.	Only the inner lining is inflamed.

If your doctor says you have **Indeterminate Colitis**, it has not been determined whether you have CD or UC.³

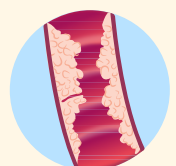
Healthy intestine



Ulcerative Colitis



Crohn's Disease



A stricture is a narrowing part of the intestine because of scar tissue in its wall.⁴

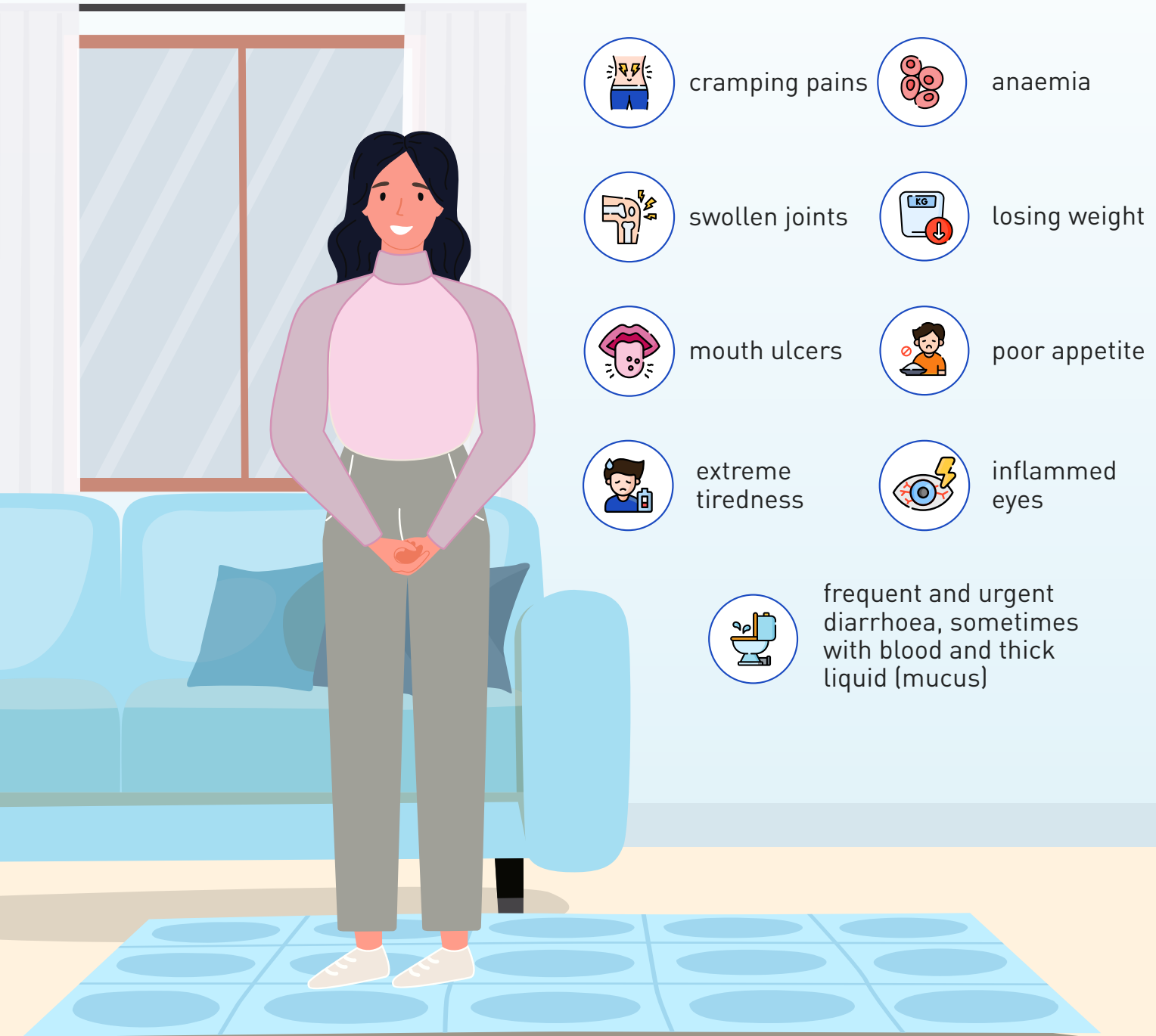
● small intestine

● large intestine/colon

● anus

What are the signs and symptoms of IBD?

CD and UC can affect each patient a little differently. Below are the the most common signs and symptoms. The symptoms you may experience depends on which part of your gut is affected.^{5, 6}



What is a flare-up?

A flare is the reappearance of disease symptoms. Taking your medicines regularly, even when you feel better, can help prevent flare-ups.



What is a remission?

Remission is when your disease is no longer active, and you will likely notice that you have no more symptoms like pain, diarrhoea or fatigue.



IBD or IBS?⁶

Inflammatory Bowel Disease (IBD) and **Irritable Bowel Syndrome (IBS)** are different, but IBD is often misdiagnosed as IBS leading to delay in treatment,^{6,7} so it is important to know the difference.

IBS Symptoms

- Gas
- Bloating
- Trouble sleeping
- Constipation

Main difference:

No visible changes seen in examination

Both

- Abdominal Pain
- Diarrhoea
- Cramps
- Fatigue

IBD Symptoms

- Fever
- Blood in stool
- Anaemia
- Weight loss

Main difference:

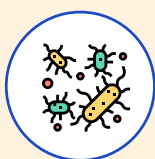
- Visible inflammation in examination
- Can get progressively worse
- May need surgery and hospitalisation

What causes IBD?

The exact causes of CD and UC remain unknown. Possible causes include:^{1,8}



A defect in the body's immune system



Infection by a virus or bacterium



A mix of genes and the environment (such as germs, diet, smoking and stress)

LEARN MORE
about IBD and its causes



How is IBD diagnosed?

Tests help your doctors diagnose you and find the best treatment for you. They also help to monitor your health after you have been diagnosed and are undergoing treatment.

Tests for IBD may include:^{9, 10}



Blood tests to check for inflammation, signs of infection and low iron levels



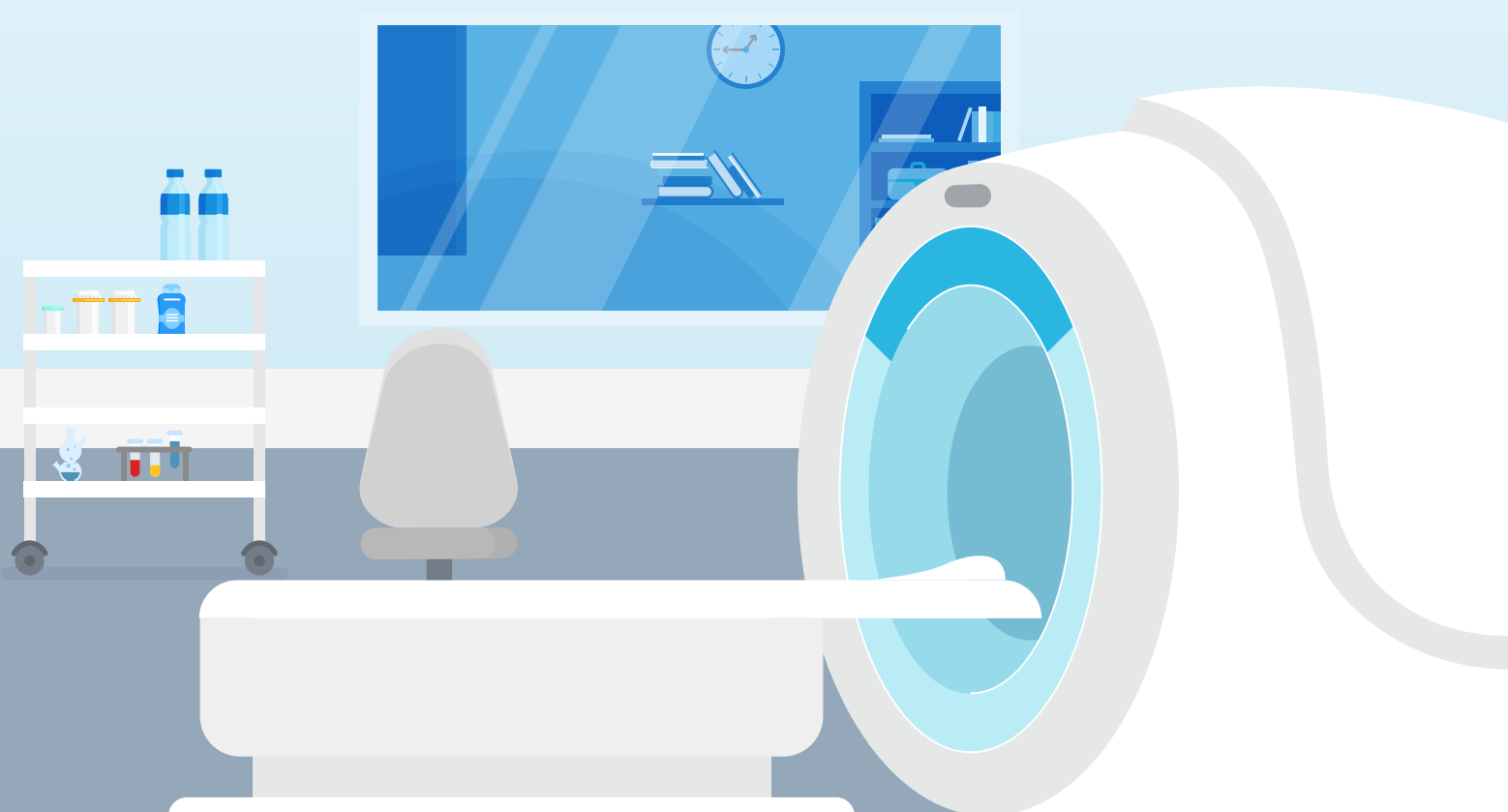
Stool tests to check for infections and inflammation



Endoscopy - a tiny camera on a long, thin tube is put through your mouth (gastroscopy) or your bottom (sigmoidoscopy or colonoscopy). At the same time, tiny pieces of your gut are taken (biopsy) to check for inflammation



Ultrasound, CT and MRI scans to help doctors see how much inflammation you have and where it is in your body



Treatments for IBD

While it's possible to manage IBD, there is no cure for it. Treatment options for IBD include medication and dietary changes. If the disease is severe or progresses quickly, surgery may be necessary.^{1, 11, 12}

You can have your medicine in different ways: tablet, injection, drip into your arm or enema.

Medications to Reduce Inflammation

and so may reduce some of your symptoms

- Sulfasalazine and 5-Amino salicylates (5-ASA)
- Steroids
- Immunomodulators
- Biologics
- Small molecules
- Antibiotics

Medications to Reduce Symptoms

but do not affect the inflammation

- Antidiarrheal
- Ointments and suppositories
- Antispasmodics
- Bulk formers for stool
- Bile salt binders
- Stool softeners
- Analgesics
- Acid-reducing drugs

Other treatments include:

A liquid diet called enteral or parenteral nutrition to treat CD flare-ups

Surgery to remove the part of the bowel if chronic inflammation has led to serious damage in the lining



Take your medications as prescribed even during times of remission to prevent flare-ups and the medication losing its effectiveness. If you experience unpleasant side effects, let your doctor know. Do not alter the amount of medication or how frequently you take it on your own.

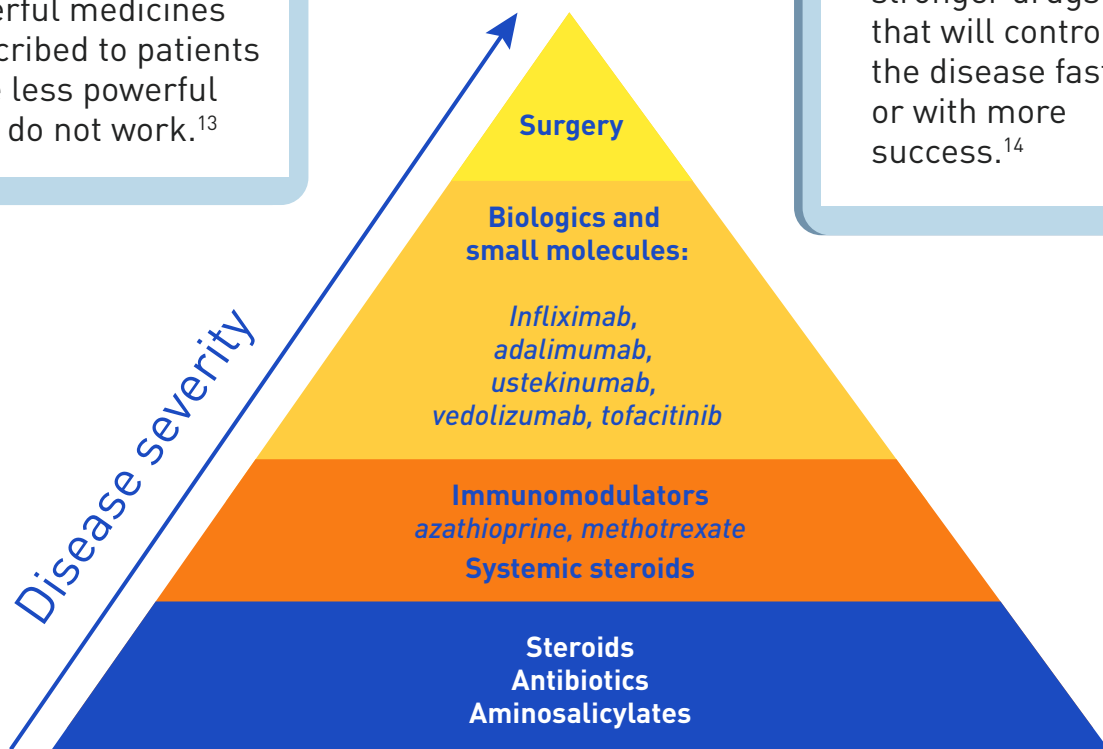
Always be on the lookout for drug interactions which may decrease a medication's effectiveness or cause unexpected side effects. Inform your doctor if you are taking over-the-counter medications, supplements, herbals, vitamins, etc.



Which treatment is for me?

Treatments for IBD in Singapore usually take the 'step-up' approach, with more powerful medicines prescribed to patients if the less powerful ones do not work.¹³

Some doctors use the 'top-down' approach, and start with stronger drugs that will control the disease faster or with more success.¹⁴



Inflammatory Bowel Disease: Therapeutic Pyramid¹⁵



Managing IBD

Apart from medical treatment, a change in lifestyle can help you manage your condition.

Diet

There's no single diet that helps IBD as everyone is different. Keep a food diary to help you observe the specific food(s) which will trigger your flare-ups. For many IBD patients in Singapore, they are dairy, gluten and spicy food.

Some CD patients need to go on a low-fibre diet to help reduce the risk of obstruction at the point of stricture.

Talk to your doctor or a qualified dietitian before making any big changes.

Quit Smoking

Stop smoking as it causes a flare or worsens symptoms.

Exercise

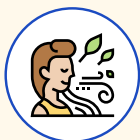
Regular exercise - frequent walks, yoga, high-intensity training, can help you manage your IBD and improve your quality of life.

Experts recommend 30 minutes of moderate exercise, 3-5 days per week.



Stress Management

If you have anxiety or depression, adopting relaxation strategies can help you keep flare-ups under control. Letting your teachers or employers know about your diagnosis may also help to relieve the pressure on you to take part in activities which will aggravate your condition.



Breathing exercises



Meditation



Keeping a journal



Spending time on a hobby



Spending time with family and friends



Getting plenty of sleep

Tips from other IBD patients

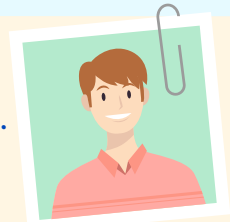
“There's a difference because right now, I'm finally regaining weight, I'm able to go out with my friends. My studies got affected the first two years of university, but in the third and the fourth year, my health started picking up after they put me on biologics. My grades started improving. I also saw a much better mental state.”

- Dharia, UC patient



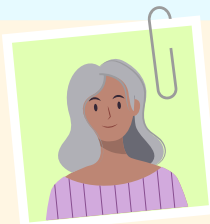
“I think that every single body is different. For me, I couldn't walk at some point. So I picked up slowly. I would definitely say that diet and exercise changed me. I started with 30 minutes, then I started cycling. And now, I'm working out 10 hours every week.”

- James, patient with Indeterminate Colitis



“Now I run my own little practice doing counselling. It's my way of making meaning out of my suffering. I've been through so much, how can I help other people on their journey? So in a way, that to me is coping, and transforming it into something meaningful.”

- Pavitar, CD patient



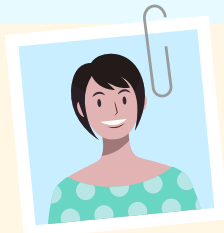
“I will avoid certain foods that will make me go to the toilet more often. But I think the changes are not drastic. I practise stress management and try to take things slightly easier. It is good to know your body, so you do not exert it.”

- Billy, UC patient



“I had an Excel table detailing what I had for breakfast, lunch, snack and dinner, and then my feelings and symptoms. Everything was captured. I kept it for six months, and the trick is, if I have certain symptoms today, I would have to look at the food I ate the past three days. The trigger would be one of those. The culprit was there.”

- Nidhi, CD patient



Support for you

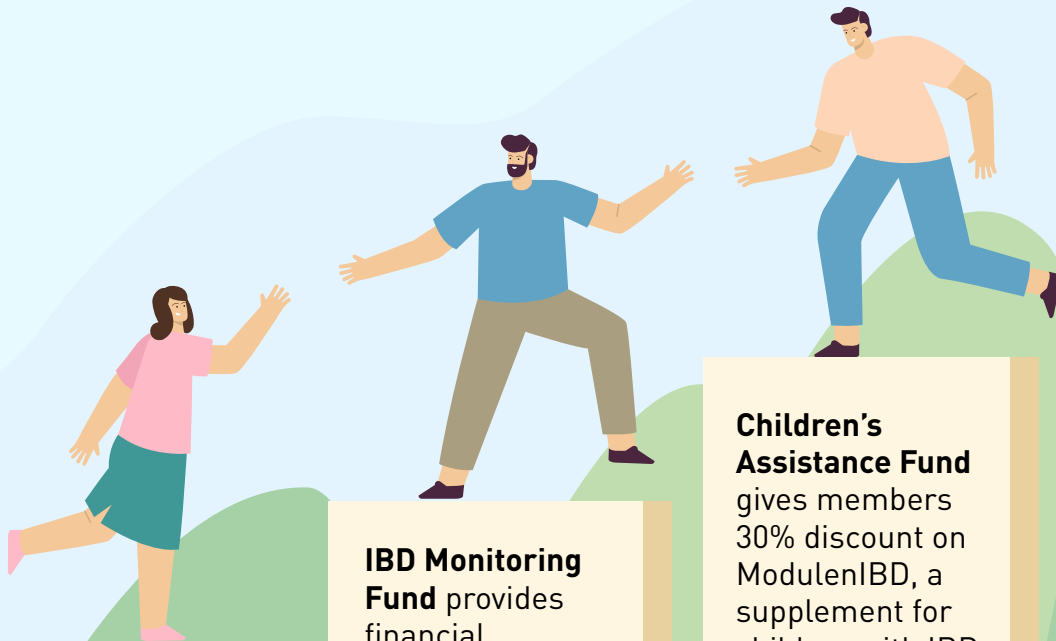


Who Are We?

We are group of dedicated volunteers who have come together to create a support system for patients diagnosed CD or UC.

From diagnosis to management, you may encounter challenges resulting from having IBD. You don't have to deal with it alone. We are here to help you, and support you through your life journey with IBD.

Our Programmes



Talks by experts including gastroenterologists, psychologists, dieticians, pharmacists and counsellors so that patients may pick up skills to better manage their condition.

IBD Monitoring Fund provides financial assistance of \$600 a year to help IBD patients manage the costs of blood tests, X-rays, CT scans, ultrasound, colonoscopy and endoscopy which are needed regularly to monitor their condition.

Children's Assistance Fund gives members 30% discount on ModulenIBD, a supplement for children with IBD who have to stop taking solid food for 6-8 weeks. Families in need of 100% assistance receive ModulenIBD free-of-charge for up to eight weeks.

Activities for IBD patients to interact and share their experiences. Talking to someone else with IBD may help you to accept your condition and manage it holistically. You may also find meaning in helping one another.

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