## LIVING WITH INFLAMMATORY BOWEL DISEASES

**CROHN'S & COLITIS** SOCIETY OF SINGAPORE

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

The information in this booklet is for educational purposes only. It is not intended to be a substitute for professional medical advice. Always consult your doctor regarding your specific medical condition.

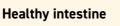
### **About IBD**

(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 <sup>1,2</sup>	Ulcerative Colitis <sup>1</sup>
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.<sup>3</sup>





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Ulcerative Colitis

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large intestine/colon

small intestine

Crohn's Disease

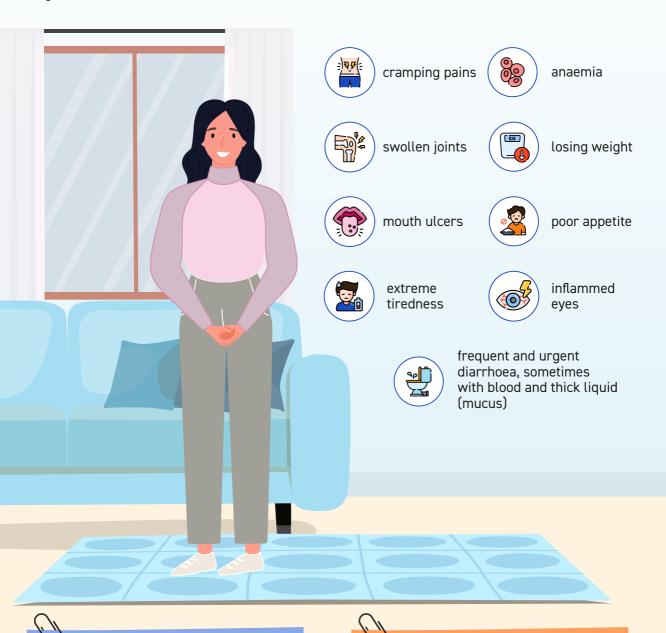


A stricture is a narrowing part of the intestine because of scar tissue in its wall.<sup>4</sup>

anus

### What are the signs and symptoms of IBD?

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



### 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?**<sup>6</sup>

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

Both

- Abdominal

- Diarrhoea

- Cramps

- Fatigue

Pain

### **IBS Symptoms**

- Gas
- Bloating
- Trouble sleeping
- Constipation

### Main difference:

No visible changes seen in examination

#### **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)

### 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:<sup>9, 10</sup>



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



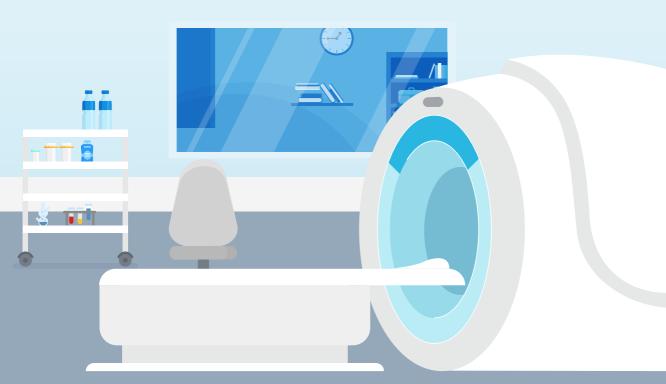
**Endoscopy** - a tiny camera on a long, thin tube is put through your mouth (gastroscopy) or your bottom (sigmoidoscopy or colonoscopy). At the same time, tiny pieces of your gut are taken (biopsy) to check for inflammation



**Stool tests** to check for infections and 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.<sup>1, 11, 12</sup>

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 symp

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

### Antidiarrheal

Symptoms

- Ointments and suppositories
- Antispasmodics
- Bulk formers for stool

Medications to Reduce

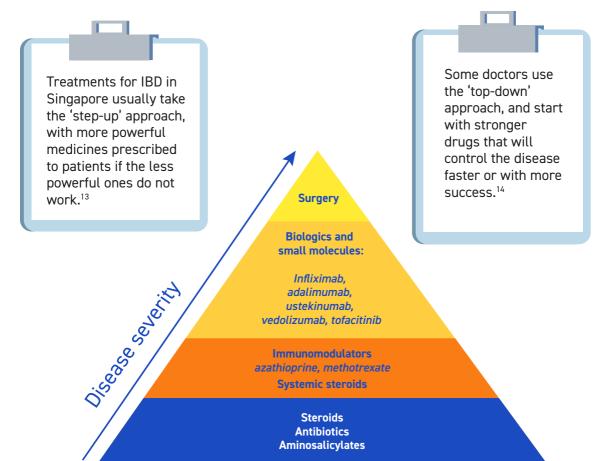
- Bile salt binders
- Stool softeners
- Analgesics
- Acid-reducing drugs

#### 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?



### Inflammatory Bowel Disease: Therapeutic Pyramid<sup>15</sup>

The risks and benefits of taking medications and controlling disease need to be carefully considered. Each medication has potential side effects, but great benefits.

Speak to your doctor about your options for treatment.

#### FIND OUT MORE

about managing treatment costs at https://bit.ly/ahcforall 

### **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.

# 6

### 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



Spending time on a hobby



Meditation



Spending time with family and friends



Keeping a journal



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.

#### **Contact us**

Email Whatsapp

### 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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### Meet other people living with IBD. Join us to learn how to manage your condition.

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This education effort is supported by

