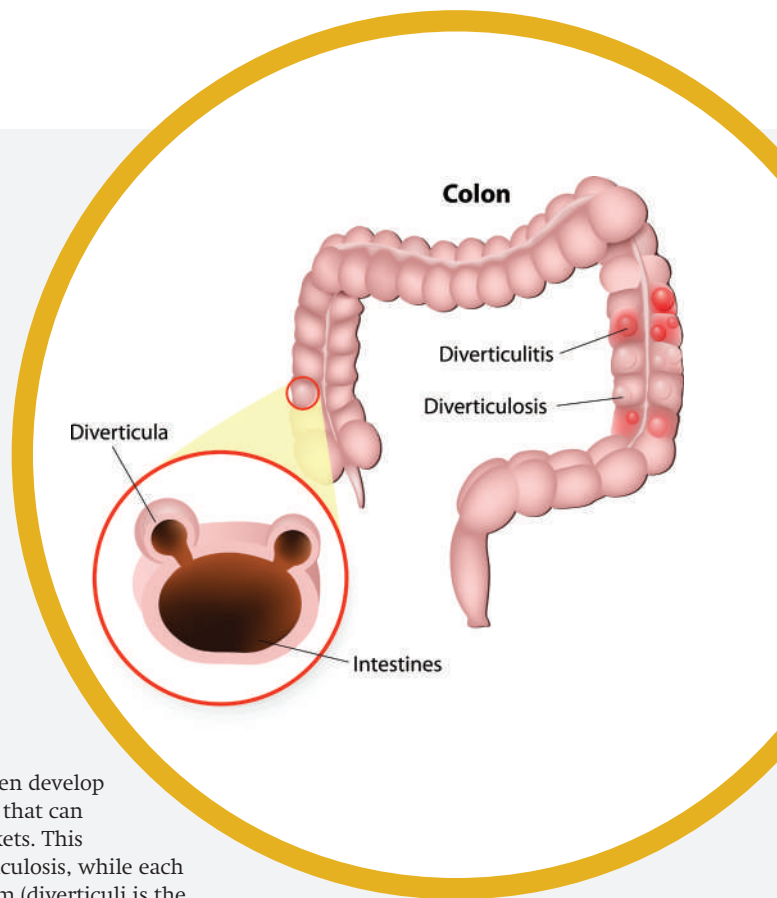


Bulges and pockets

Diverticulitis is the infection or inflammation of bulges and pockets that form in the intestine wall. Learn more about its symptoms and treatment options.



People 40 years and older often develop bulges in their intestine wall that can lead to the formation of pockets. This condition is known as diverticulosis, while each pocket is called a diverticulum (diverticuli is the plural form).

When the diverticulum does not present any symptoms — which is quite common — there is no need for anything to be done. However, these pockets can get inflamed or infected, in which case diverticulitis has occurred.

Why bulges form

The medical fraternity still can't pinpoint why bulges and pockets form. Doctors speculate that a key factor is a low-fibre diet. The theory is that such a diet leads to a lack of bulk in the stool, causing the colon to work harder.

The stress may lead to weak spots along the organ, leading to the formation of pockets. Doctors suspect that the inflammation or infection arises from the bacteria growing in the pockets. Switching to a high-fibre diet after the formation of diverticuli will not reverse the condition.

Symptoms of diverticulitis

Lasting between a few hours and a week or more, these include:

- Pain over area of inflammation (usually in the lower left side) that worsens sometimes when you move
- Fever
- Bloating and gas
- Loose stools
- Nausea and vomiting
- Lack of appetite

Severe infection can cause perforation and abscess that require hospitalisation and perhaps surgery. Sometimes, the perforation reaches the adjacent organs such as the bladder. This could lead to a fistula — which is an unusual connection between the colon and the bladder — and thus the passing of flatus and/or faeces out with the urine.

Patients with recurring bouts of diverticulitis have to be aware of changes in their bowel habits, because repeated infections can lead to scarring and narrowing of the colon.

Treatment of diverticulitis

- Mild: antibiotics usually prescribed
- Medium: may require hospitalisation, bowel rest and intravenous drip, in addition to antibiotics
- Severe: where there is a perforation or an abscess, emergency surgery to remove that segment of the colon may be required; people with recurring episodes of diverticulitis may also require surgery



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