

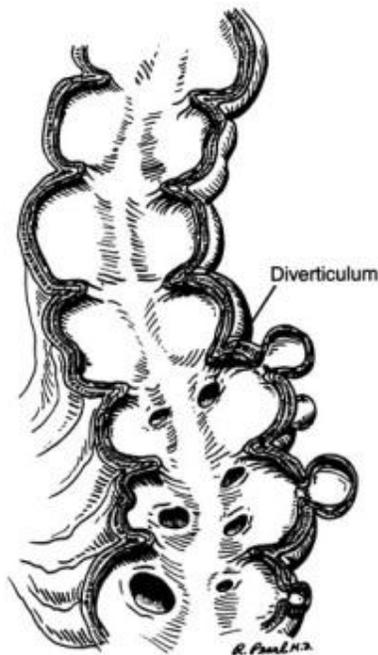
## **Diverticular Disease**

### What is diverticular disease?

Diverticular disease is the general name given to the condition that creates small sacs or pouches from the wall of the colon and the complications that can arise from the presence of those sacs. The term diverticulosis refers to simply having diverticula within the colon but without complications or problems from those sacs. The presence of diverticulosis can lead to several different complications such as diverticulitis, perforation, stricture, fistula, and bleeding.

Diverticulitis is an inflammatory condition of the colon that is thought to be caused by perforation of one of the individual sacs. The most common symptoms of diverticulitis are abdominal pain and fever called simple diverticulitis. There can be several secondary complications of an attack of diverticulitis. When a secondary complication forms from an attack of diverticulitis, it is called complicated diverticulitis. These complications include abscess formation and perforation of the colon with peritonitis. An abscess is a pocket of pus that the body has walled off. Peritonitis is infection that spreads freely within the abdomen. Peritonitis often causes patients to become quite sick and may be life-threatening.

Other complications of diverticulosis include bleeding, formation of a narrowing in the colon that does not easily let stool pass (called a stricture), or formation of a tract to another organ or the skin (called a fistula). When a fistula forms, it most commonly connects the colon to the bladder. It may also connect the colon to the skin, uterus, vagina, or another portion of the bowel.



### [What causes diverticular disease?](#)

The most commonly accepted theory as to why diverticulosis occurs is that high pressure within the colon, which may be caused by a diet low in fiber and high in red meat, causes weak areas of the colon wall to bulge out and form sacs. At present, it is not well understood how these sacs become inflamed and cause diverticulitis.

### [How is diverticulitis diagnosed?](#)

Diverticulosis often causes no symptoms and is often diagnosed during tests such as screening colonoscopy. Diverticulitis is often characterized by fever and lower abdominal pain. A CT scan of the abdomen and pelvis is often used to confirm the diagnosis.

### [What can be done to treat diverticular disease?](#)

Most people with diverticulosis will not have symptoms. People with diverticulosis are advised to eat a diet high in fiber and fruits and vegetables and low in red meat.

Most cases of diverticulitis can be treated with antibiotics either by mouth or by the intravenous (IV) route. Diverticulitis with an abscess may be treated with antibiotics and a drain placed under X-ray guidance.

Surgery for diverticular disease is indicated in the following circumstances:

Diverticulitis with a rupture in the colon that has resulted in pus or stool leaking into the abdominal cavity, resulting in peritonitis. Patients are usually quite ill and often require emergency surgery.

There is an abscess that cannot be effectively drained.

A severe case of diverticulitis failing to respond to maximized medical therapy including IV antibiotics and hospitalization.

The need for aggressive treatment in patients who are very immunocompromised, such as patients who have received an organ transplant or who are receiving chemotherapy.

Diverticulitis that has caused a colonic stricture or fistula.

Patients who have had multiple attacks may be offered surgery as a strategy to prevent future attacks.

Surgery for diverticular disease usually involves removal of the affected segment of colon. It may or may not involve creation of a colostomy or ileostomy (intestine brought out through the abdominal wall to drain into a bag). The choice of operation to treat diverticular disease depends greatly on the exact circumstances surrounding each patient.

### [What is a colon and rectal surgeon?](#)

Colon and rectal surgeons are experts in the surgical and non-surgical treatment of diseases of the colon, rectum, and anus. They have completed advanced surgical training in the treatment of these diseases, as well as full general surgical training. Board-certified colon and rectal surgeons complete residencies in general surgery and colon and rectal surgery, and pass intensive examinations conducted by the American Board of Surgery and the American Board of Colon and Rectal Surgery. They are well versed in the treatment of both benign and malignant diseases of the colon, rectum and anus and are able to perform routine screening examinations and surgically treat conditions, if indicated to do so.