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Diarrhea, cramping and fatigue may seem like symptoms of a simple stomach bug. But if they dont go away or if theyre accompanied by issues such as night sweats, joint pain or mouth sores they might point to a more serious underlying condition. For more than a million people in the U.S., that condition is Crohns disease.Crohns disease is a type of inflammatory bowel disease (IBD). That means it causes long-lasting (chronic) inflammation in your digestive tract most often the end of the small intestine and the beginning of the large intestine. But it can affect any part of the digestive tract, also called the gastrointestinal (GI) tract, from the mouth to the anus.While the condition is long lasting, its symptoms may not be constant. For many people, the symptoms come and go in flares with periods of calm, called remission, in between. The severity and location of Crohns disease can vary a lot from person to person.Symptoms of Crohns disease differ depending on where the inflammation occurs and how severe it is. Common symptoms include:Diarrhea. Fever. Fatigue. Abdominal pain and cramping. Blood in the stool. Mouth sores. Reduced appetite and weight loss. Pain or drainage near or around the anus.When the condition is more severe, Crohns can cause complications outside your GI tract. These may include:joint pain and arthritis. Eye inflammation. Skin rashes or bumps. Liver or bile duct problems. Kidney stones. Iron deficiency anemia. Delayed growth and development in children.Crohns disease also can lead to serious intestinal complications such as:Bowel obstructions due to scarring and narrowing of the intestines. Ulcers anywhere along the digestive tract. Fistulas, which are connections between different body parts that shouldnt be there, like intestine-to-intestine or intestine-to-skin fistulas. Anal fissures, which are small tears in the lining of the anus. Malnutrition, caused by poor nutrient absorption. Hidradenitis suppurativa, which is a painful skin condition.Over time, Crohns may contribute to osteoporosis, liver disease, eye inflammation and blood clots. The disease and its treatments also may increase your risk of certain cancers, including colorectal cancer. Thats why routine screenings and ongoing medical care are essential.You can develop Crohns disease at any age, but its most often diagnosed between the ages of 20 and 29. Several factors increase your risk, including:Family history If you have a parent, sibling or child with Crohns, youre more likely to develop it. Smoking This is the most controllable risk factor. Smoking can increase your likelihood of developing Crohns and worsen its course. Ethnicity Crohns is more common among people of Eastern European (Ashkenazi) Jewish descent. But rates are rising in other populations. Use of NSAIDs Drugs like ibuprofen (Advil, Motrin IB, others) or naproxen sodium (Aleve) may irritate your bowel and make symptoms worse.Scientists believe imbalances in the mix of good and bad bacteria in your digestive system along with a compromised immune system also may play a role.Diagnosing Crohns disease can be challenging because its symptoms often resemble those of other digestive conditions. Healthcare professionals use a combination of tools to confirm the diagnosis:A physical exam and discussion of your symptoms. Blood tests to detect anemia, inflammation or infection. Stool tests to check for blood, infection-causing organisms or calprotectin a protein thats released by white blood cells when there is inflammation in the intestines. Imaging studies, such as CT scans or MRI scans, to assess inflammation, narrowing of the intestines (strictures) or abscesses. Endoscopy a procedure that uses a thin, flexible tube with a camera to look inside your digestive tract. Another option is capsule endoscopy. With capsule endoscopy, you swallow a capsule with a camera inside that transmits pictures from inside your digestive tract.The goal of drug therapy for Crohns disease is to achieve and maintain remission. While medications can help manage your disease, none offers a cure.Medications for Crohns disease include:Corticosteroids Corticosteroids, which may be just called steroids, are often used to manage flares because they act quickly to reduce inflammation. But they are only recommended for short-term use because they can cause bone loss, high blood pressure and high blood sugar. Medications that suppress your immune system These drugs are called immunosuppressants or immunomodulators. They are used to keep Crohns in remission after stopping corticosteroids. They include medications like methotrexate and a group of drugs called thiopurines (azathioprine and 6-mercaptopurine). Biologics These medicines act to stop certain proteins in the body from causing inflammation. Some, such as infliximab (Remicade), adalimumab (Humira) and certolizumab pegol (Cimzia), are called TNF inhibitors because they target a protein called tumor necrosis factor. Others, such as ustekinumab (Stelara), risankizumab (Skyrizi) and mirikizumab-mrkz (Omvoh), target a group of proteins called interleukins. Natalizumab (Tysabri) and vedolizumab (Entyvio) block proteins called integrins to stop immune cells from reaching the gut lining and causing inflammation. You get these medicines either as an IV or as a shot under your skin, depending on the medication. Biologics can be expensive. Nearly identical versions of some of these medicines known as biosimilars may be more affordable. Janus kinase (JAK) inhibitors These newer oral medications reduce inflammation by targeting parts of the immune system. They may be used when other options havent worked. The Food and Drug Administration has approved upadacitinib (Rinvoq) for Crohns disease, but JAK inhibitors arent recommended during pregnancy.Other medicines may include:Antibiotics to help treat or heal fistulas and abscesses. Fiber supplements such as psyllium (Metamucil) or methylcellulose (Citrucel). Loperamide (Imodium A-D) for diarrhea. Acetaminophen (Tylenol, others) for pain. Specific vitamins or supplements if you have a hard time absorbing some nutrients.There is no special Crohns diet that helps everyone, but many people identify specific foods that trigger symptoms. A registered dietitian can help you create a tailored plan to help you eat a healthy diet and avoid flares.You may find that you benefit from:Low-fiber diets when you are having flares. Lactose-free diets if you cant tolerate dairy products. Avoiding spicy, greasy or highly processed foods.Sometimes, your care team may recommend a liquid-only formula diet, called enteral nutrition, to reduce inflammation. This approach may promote healing without the side effects of corticosteroids.If diet, medications and other treatments dont control your symptoms or complications arise your healthcare team may suggest surgery. About half of people with Crohns disease will need surgery at some point, though it doesnt cure the condition.Surgery typically involves removing the damaged part of the digestive tract and reconnecting the healthy sections. It also may be used to close fistulas or drain abscesses.Crohns disease affects your emotional well-being in addition to your physical health. People with IBD are more likely to experience anxiety and depression, often due to the uncertainty of flares, body image concerns or the demands of chronic illness.Support groups, therapy, mindfulness techniques and open communication with loved ones can help manage these emotional challenges.Although Crohns is a lifelong condition, many people manage their disease effectively and lead full, active lives. Advances in treatment and a deeper understanding of the disease continue to improve outlook and quality of life. Discover more Healthy Gut content from articles, podcasts, to videos. View Healthy Gut

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