

Module 4 Lesson 5

Transcript

I'm super excited to talk to you today about diverticular disease. Okay. I don't know if anybody's ever said that before, but I'm excited to talk to you about it today. Hopefully you've heard of, but not experienced diverticulitis or diverticulosis yourself, but it's one of those GI disorders that really rocks someone's world. We'll get more into the statistics of this condition in a few, but I'll let you know that diverticular disease is really pretty common, which is why we're devoting an entire lesson to learning about it.

In this lesson, I'm going to cover what diverticular disease is, the difference between diverticulitis and diverticulosis, what's going on in the gut, how it's diagnosed and treated, and nutrition recommendations.

So let's get learning. I have vivid memories of working with clinical diverticulitis patients during my early days as a dietetic intern. By the time I got ahold of them, they were so relieved to see me because they were no longer acute, they were starting to feel better and super motivated to talk about their diet. I don't see a lot of active diverticular disease in my practice, but sometimes I'll get a client who will tell me in their intake that they've had diverticulitis at some point in their health history. Anyone who's ever dealt with it has told me how excruciatingly painful it is and more often than not, it requires a hospital stay. People will do anything to not have a repeat experience. The shell shock from the pain and suffering leaves the patients super skeptical of eating and worried that they're going to experience it again, but also motivated to make changes.

So what is diverticular disease? Well, diverticula or pouches that form in the bowel, they can be teeny tiny, the size of a pea or larger, and they form and weak spots of the bowel lining from pressure that may come from gas, stool or fluid. They usually form at the bottom of the colon called the sigmoid colon, and that comes from pressure or straining to have a bowel movement. When the diverticula are chronically there but are not causing serious problems, the condition is called diverticulosis. People may complain of pain usually in the lower left side of the abdomen or they may be completely pain free. The symptoms are not really awful and people may live with diverticulosis and not even really know it.

Diverticulosis is very common. In the US, it's believed to affect 10% of people over age 40, and 50% of people over the age of 60. The rate of diverticulosis increases with age and it affects almost everyone over the age of 80. If however, complications arise and the diverticula are blocked



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or infected, you have an acute version called diverticulitis. With diverticulitis, you'll often see fever, chills, severe cramping and pain, and there may also be infection.

In about 25% of people dealing with diverticulitis, complications may arise. The diverticula may tear, or there may even be an abscess or obstruction which may leak stool into the abdomen, or maybe a bacterial infection that could be life threatening. Sounds pretty awful, right?

You want to know the risk factors so you can avoid it and you can help your clients avoid it. You're going to find them all in a handout, but briefly the risk factors are age, weight, smoking, being a non-exerciser, a high fat, low fiber diet and certain medications will up your risk as well. Usually diverticulitis is diagnosed with a CT scan, and treatment may be antibiotics or pain relievers, and the body mostly is going to heal itself. In some extreme cases, surgery is even required. In almost all cases though, a liquid diet to promote bowel rest is part of the short term treatment plan.

The dietary recommendations have been all over the place and I'm pretty sure some are still advising against seeds and nuts. We used to believe that small hard bits like blueberry seeds or pieces of nuts were to blame for acute attacks. We no longer follow that line of thought, but the diet prescribed to manage diverticular disease and avoid attacks is a high fiber diet. There are no foods that must be avoided, so make sure to promote whole grains, fruits, vegetables, beans and legumes. During an attack, a clear liquid diet and bowel rest are usually prescribed with a pretty quick return to a high fiber diet once the symptoms resolve. In addition, you want to make sure your clients are sweating often and drinking up and avoiding constipation.

So to review the key points here, diverticula are pouches that form in the bowel. In diverticulosis, the diverticula are chronically there but are not causing serious problems. This condition is common and symptoms can be very mild. With diverticulitis, the diverticula are blocked or even infected, and you'll often see fever, chills, cramping, pain, and potential for complications like tearing, obstruction, and even bacterial infection. Ways to lower risks include managing weight, not smoking, exercising and eating a high fiber diet. In clients with diverticular disease, you want to promote generally a healthy high fiber diet and during attacks, recommend a clear liquid diet.

I am so excited to see you in the very next lesson.

