

Module 4, Lesson 5 Handout:
Risk Factors for Diverticulitis

Before we get into diverticulitis, let's start with diverticulosis. This is when small pouches, called diverticula, form in the digestive tract. For some people, diverticula can exist without causing serious problems - sometimes just mild pain or sometimes there will be no symptoms at all. This is a condition called diverticulosis. Diverticulitis, on the other hand, is a form of diverticular disease characterized by infection or inflammation of the diverticula. Diverticulitis can lead to serious complications. By addressing modifiable risk factors such as smoking, weight, exercise and diet, you may be able to help clients reduce the severity of this condition. Let's dive a little deeper into the research to see how you can help your clients lower their risk for developing diverticulitis.

Age

Although this isn't a modifiable risk factor, the research is consistent that the risk of developing diverticula increases with age so it is worth noting here. Like our skin and bones, our bowels don't continue to repair itself as well over time. Diverticular disease is reported mostly in the United States, Western Europe and Australia, and mostly affects those aged 60 years or older. Research has shown an increase in diverticular disease in younger patients, with higher incidences of the disease in males under the age of 50, however it is still more likely that you'll see this condition in your clients who are older.

Weight

Obesity increases the risk of developing diverticulitis - there are fewer instances in people who are not obese. A higher BMI has been associated with diverticular disease, though some studies looked at the weight distribution rather than the BMI. These researchers found that higher visceral fat (abdominal obesity, fat surrounding organs) and subcutaneous fat (fat directly underneath the skin) was associated with higher incidence of diverticulitis as well as higher BMI.

Smoking

Smoking doesn't only break down the lungs, it affects every cell in your body and your bowels are no exception. Smoking has been associated with increased onset and incidence of complications in those with diverticular disease, as well as increased incidence of diverticulitis. If you don't already suggest your clients quit smoking, it goes without saying that they'll improve their health in many ways by doing so.

Exercise

Non exercisers are more at risk of developing diverticula than exercisers, so encouraging your clients to Sweat Often can even benefit their gut. One study that looked at men and women over the age of 50 found those who ran daily or performed vigorous exercise had lower risk for diverticular disease. It's also been shown that exercise can minimize diverticular disease complications, which may be important to note for clients who come to you diagnosed with this condition.

Diet

A diet high in animal fat and low in fiber tends to increase risk. One study found that men who ate a high red meat, low fiber diet had three times the risk for developing diverticular disease compared with men who ate a low red meat, high fiber diet. Besides lowering cholesterol and boosting digestion, fiber plays a still unknown role in diverticula prevention. It's known that a diet higher in fiber will help soften the stool and reduce the pressure on the colon when stool passes through, thereby minimizing the risk of diverticula forming. More research still needs to be conducted to assess other components of the diet that will minimize risk of developing diverticular disease and that will minimize the symptoms that occur in those who do have diverticulitis.

Medications

There are also some drugs that increase risk, such as corticosteroids, opioids and non steroidal anti-inflammatory drugs (NSAIDs). NSAIDs such as aspirin and ibuprofen (Advil and Motrin) are associated with injuries to the lower intestine, and in some cases diverticular complications such as diverticulitis and bleeding. Researchers found that patients who took corticosteroids more regularly were almost three times more at risk for a diverticular rupture (resulting in diverticulitis), than those who had taken it in the past. Opioids have also been associated with diverticular ruptures, with a two times higher risk in people who took opioids more regularly compared to those who have just taken it in the past. It's important to know what medications your clients are taking in general and in order to assess their risk for diverticular complications, but remember that not everyone who takes these medications will develop diverticular disease.