INFLAMMATORY BOWEL DISEASE (IBD): CROHN’S DISEASE

Treatment: Surgery

Medication helps many patients with Crohn’s disease, but for some, it is not enough to help relieve symptoms. **Up to 85 percent of patients with Crohn’s disease will need surgery at some point.** Surgery is not a cure, though it can help ease symptoms or treat any complications. Surgery is often a last resort and used when a patient has:

- Bowel blockage.
- Bleeding that won’t stop.
- Fistulas.
- Abscess.
- Symptoms that don’t get better with medication.

There are a few types of surgery that can be done for Crohn’s disease. A surgeon will work with you and your gastroenterologist to figure out if you need surgery and which surgery would be best.

For any surgery, you will get general anesthesia (be put totally to sleep) and will be in the hospital for up to a week after. It can take up to six weeks for patients to fully heal after surgery.

**Small Bowel Resection**

- This surgery is done to remove part of the small bowel.
- This is done when there is a block or severe disease in the small bowel that does not get better from medicine.
- The surgeon will take out the part of the bowel and reconnect the healthy ends of the bowel.
• This surgery can be done laparoscopically or as an open surgery.
  - **Laparoscopic** — Uses a few small, ½-inch incisions in the belly to put in a thin tube with a camera on the end. Looking at the images from the camera, the surgeon puts tools through the small incisions to complete the surgery.
  - **Open** — Uses one 6-inch incision in the belly.

**Partial or Subtotal Colectomy**

• This surgery is sometimes called a large bowel resection, meaning it removes part of the large bowel.
• This is done when there is a block, a fistula or severe disease in the large bowel that does not get better from medicine. The surgeon will take out the part of the bowel and reconnect the healthy ends of the bowel.
• This surgery can be done laparoscopically or as an open surgery.
  - Laparoscopic — Uses a few small, ½-inch incisions in the belly to put in a thin tube with a camera on the end. Looking at the images from the camera, the surgeon puts tools through the small incisions to complete the surgery.
  - Open — Uses one 6-inch incision in the belly.

**Proctocolectomy and Ileostomy**

• This surgery is done to take out the whole large bowel and rectum.
• An ileostomy is a small hole in the belly. The last part of the small bowel, the ileum, ends at this hole outside of the body. A removable, external pouch (ostomy pouch) is connected to the hole to collect the content of your intestines (stool). The ileostomy may be temporary or permanent.
• With total removal of the colon and rectum (proctocolectomy), you will have the ostomy for the rest of your life.