Oxford University Hospitals NHS Trust

Surgical Emergency Unit

Diverticulitis

Information for Patients
What is diverticulitis?

Diverticular disease is a common condition where you develop sac-like lumps through a point of weakness in the wall of the large bowel. They are related to not eating enough fibre which leads to small, hard stools. These are more difficult to pass and will cause you to strain when going to the toilet. Most people with diverticula have few or no symptoms but up to a third may develop the symptoms of diverticulitis or inflammation of one or more of these sac-like lumps.

Risk Factors

- **Age** – you are more likely to develop diverticulitis if you are over 40 years of age.
- **Diet** – eating a diet low in fibre increases the likelihood of developing diverticulitis.
- **Lack of exercise** – little exercise increases the risk of constipation which affects the likelihood of developing diverticulitis.
- **Obesity** – being seriously overweight increases your odds of developing diverticulitis.
- **Smoking** – people who smoke cigarettes are more likely to experience diverticulitis.

Signs and symptoms

- Pain that’s often sudden, severe and located in the lower left side of the abdomen
- Sometimes, abdominal pain that may be mild at first becoming worse over several days, possibly fluctuating in severity
- Change in bowel habits
• Constipation
• Diarrhoea
• Nausea and vomiting
• Loss of appetite
• Bloating
• Fever
• Bleeding from your bottom (less common)
• Pain when you pass water (urinate).

**Treatment**

In general, treatment depends on the severity of your signs and symptoms and whether this is your first attack of diverticulitis. If your symptoms are mild, a liquid or low-fibre diet and antibiotics may be all you need but you may need hospital care if:

• Your pain cannot be controlled using paracetamol
• You are unable to drink enough fluids to keep hydrated
• You are not able to take antibiotics by mouth
• Your general state of health is poor
• You have a weakened immune system
• Your GP suspects you might have complications
• Your symptoms fail to improve after two days (48 hours) of treatment at home.

If you are admitted to hospital for treatment, you are likely to be kept hydrated using an intravenous drip (a tube that is directly connected to your vein). You will also receive injections of antibiotics through the drip. Most people start to improve within
two to three days. Surgery is only recommended if it is felt that the benefits outweigh the risks. Factors that may cause surgery to be recommended include:

- Developing a serious complication such as a perforated bowel or a blockage of the bowel
- Having a history of serious complications arising from a previous episode of diverticulitis
- Having symptoms of diverticular disease from a young age (it is thought that the longer you live with diverticular disease, the greater your chances of having a serious complication)
- Having a weakened immune system or other underlying factors that make you more at risk to the effects of infection.

**Prevention**

Eating a high-fibre diet may help to prevent diverticular disease or it may improve your symptoms.

You should eat a balanced diet which includes at least five portions of fruit and vegetables a day, plus whole grains such as whole wheat bread or brown rice. Adults should aim to eat between 18g (0.6oz) to 30g (1.05oz) of fibre a day, depending on their height and weight. Your GP will be able to advise you.

It is recommended that you gradually increase your fibre intake to help to prevent the side effects associated with a high-fibre diet, such as bloating and wind. Also drink plenty of fluids because this will help to prevent any side effects.

Once you have reached your fibre target, stick to it for the rest of your life if possible. The fibre found in certain fruits and vegetables is thought to be more effective in preventing diverticular disease than the fibre that is found in cereals.
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