

The background is a light blue gradient with several realistic water droplets of various sizes scattered across it. Some droplets are at the top, some at the bottom, and some in the middle. They have highlights and shadows, giving them a 3D appearance.

DIVERTICULAR DISEASE

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ACKNOWLEDGEMENT

[HTTPS://BPAC.ORG.NZ/2023/DIVERTICULITIS.ASPX](https://BPAC.ORG.NZ/2023/DIVERTICULITIS.ASPX)

DIVERTICULITIS: POCKETS OF KNOWLEDGE

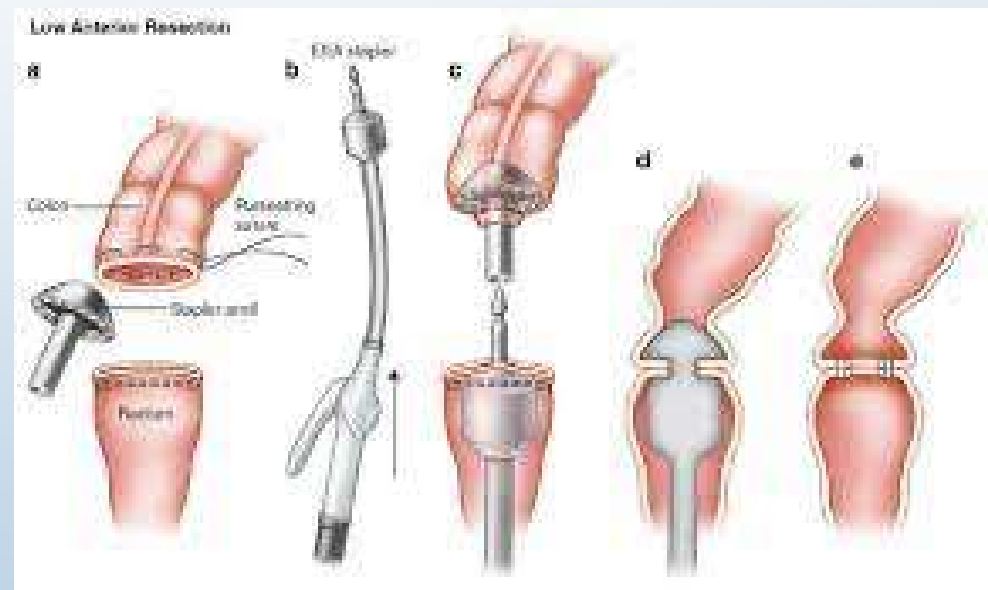
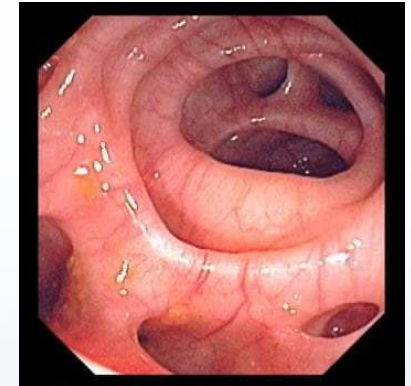
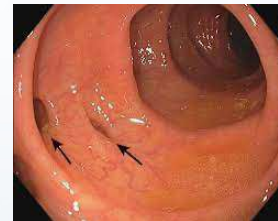
PROFESSOR IAN BISSETT

GLOSSARY

- **DIVERTICULUM** – pouch-like protrusion that forms at a weak point of the gastrointestinal wall
- **DIVERTICULOSIS** – the presence of diverticula
- **UNCOMPLICATED DIVERTICULITIS** – acute or long-term inflammation of the gastrointestinal wall associated with diverticula but without complications
- **COMPLICATED DIVERTICULITIS** – diverticulitis with either abscess, fistula formation, perforation of the intestinal wall, peritonitis or bowel obstruction
- **DIVERTICULAR DISEASE – SYMPTOMATIC** diverticulosis including diverticulitis and its associated complications

COLONIC DIVERTICULOSIS

- Usually left sided in the west
- Right sided in the east
- Usually incidental finding on CT or colonoscopy
- <5% symptomatic
- Etiology unknown but many 'theories'
- Poor quality colonic conduit from a surgeon's POV



DIVERTICULITIS

UNCOMPLICATED

COMPLICATED

- Increasing incidence
- Younger patients
- 2005-2015 NZ data almost 100% increase in rates of hospital admissions for diverticular disease in males aged 30 – 54
- RISK FACTORS for DIVERTICULITIS
 - Increasing age
 - Western diets, high in red meat and refined grains and low in fibre
 - Obesity, specifically central obesity
 - Smoking
 - NSAIDs, opioids and corticosteroids
 - Family history and genetics (?40 – 50% of diverticular disease)

**UNCOMPLICATED
EXAMINATION, BLOODS (CRP), CT
CRP > 100-140 PREDICTS COMPLICATED COURSE**

- Unwell → hospital
- Not unwell
- CRP < 50 (GET rpt in 1-2 days)
- Access to CT → simple uncomplicated diverticulitis
- NO CT – but otherwise well pt without risk factors

**CONSIDER NO ANTIBIOTICS
SIMPLE ANALGESIA +/- BUSCOPAN
DIET AS TOLERATED**



DIETARY ADVICE AND BOWEL FUNCTION

NUTS AND SEEDS ARE OK

HIGH FIBRE DIET MAY REDUCE RISK OF DIVERTICULITIS

'CONSTIPATION' COMMON IN ATTACKS, IMPROVEMENT MARKED BY 'DIARRHOEA'

ILEUS SECONDARY TO PERITONITIS