

Ulcerative Colitis

What is Ulcerative Colitis?

Ulcerative colitis (UC) is a chronic inflammatory bowel disease (IBD) that causes the immune system to start attacking the gut, leading to inflammation and ulcers in the large intestine (colon) and rectum.¹

It is estimated that over 500,000 people in the UK have IBD,² of which around **296,000** have UC.³

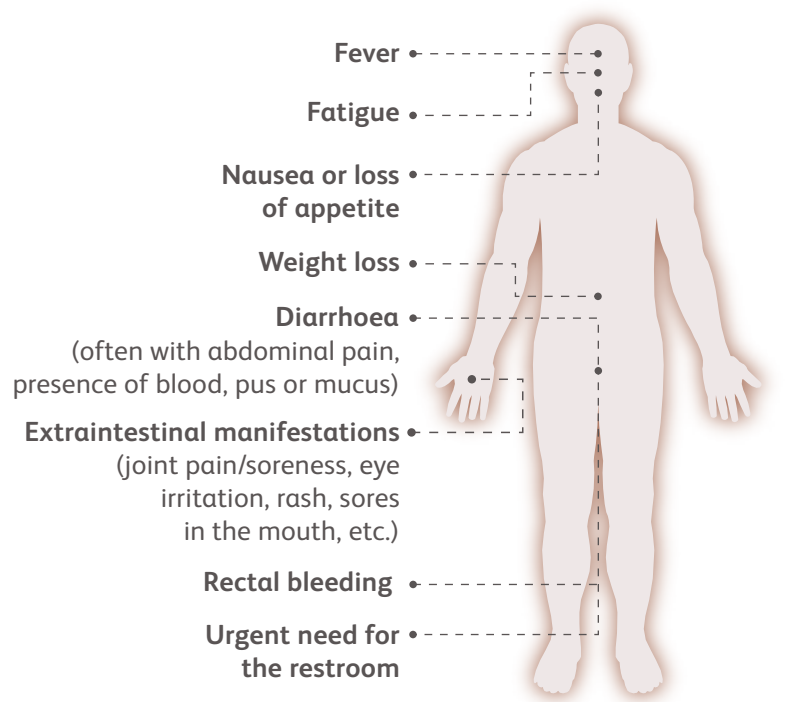
Symptoms

Signs and symptoms of UC can range from mild to severe.

Patients with UC may experience ongoing disease symptoms, or have episodes of symptom-free remission, which can be followed by relapse or flares.⁷

Though UC is usually not a fatal disease, it is serious, and in some cases, may cause life-threatening complications, including an increased risk of colorectal cancer (CRC), toxic megacolon/bowel obstruction and need for a colectomy.^{1,4,7} UC patients are almost 2.5 times more likely to develop CRC than those without UC.⁸

When the disease is active, symptoms may include:^{1,3,5,6}



These symptoms may not always be symptoms of ulcerative colitis. Please always speak to your doctor, pharmacist or nurse for further information.

Effect on Quality of Life

Living with UC may severely affect quality of life, particularly during flares and relapses.

Physical hurdles may include:^{1,5}

- Pain, fatigue or discomfort from disease symptoms
- Surgery, including placement of an ostomy bag or removal of the colon and rectum
- Frequent need to use the toilet

Socio-psychological hurdles may include:^{1,9,10}

- Stress, anxiety and/or depression related to the uncertain nature of disease, including flare timing or ability to locate toilet
- Social isolation or perceived stigma surrounding bowel-related symptoms
- Poor body image

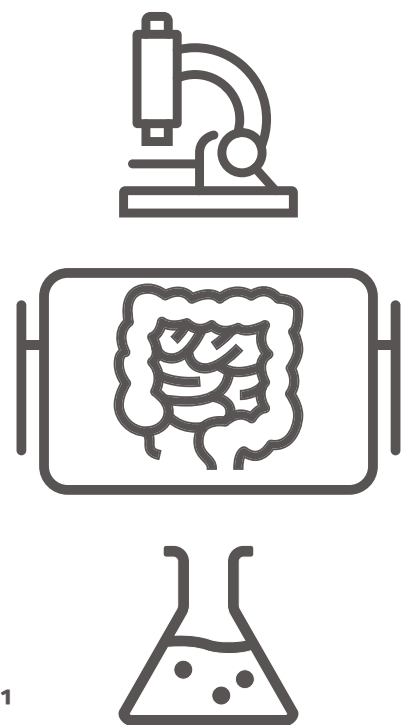
UC can also place a financial burden on patients and impact their ability to work.¹⁰

Diagnosis & Treatment

There is no single test to identify a patient who might have UC, nor is there a known cause – many physicians believe there may be genetic, environmental or immune-related origins.⁶

Typically, physicians will conduct a number of tests, including:¹

- Blood test
- Colonoscopy or flexible sigmoidoscopy, with biopsies
- Stool sample, including a faecal calprotectin test, which distinguishes between IBD and irritable bowel syndrome (IBS)¹
- Imaging tests, such as a computed tomography (CT) scan



There are treatment options available that can help manage flares and keep patients in remission, including:¹

- 5-aminosalicylates
- Biologics
- Corticosteroids
- Surgery
- Immunomodulators

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