Complications of Diverticular Disease

Aside from the ever popular bout of diverticulitis, there are a couple of other complications that one should be concerned about. These complications can be life threatening if not taken care of immediately. If you feel you have any diverticulitis symptoms starting up contact your doctor immediately to help in the avoidance of these complications.

When not taken care of diverticular disease can actually turn very dangerous. Once the diverticula have become infected and/or inflamed and it is not taken care of promptly they can fill up with infected pus and cause all kinds of havoc. Always consult a doctor or surgeon, sometimes two if need be and follow their instructions.

**Diverticulitis**: This occurs when an object, generally hard stool, becomes stuck in a diverticula pouch and becomes infected or inflamed. Prescribed antibiotics, colon rest, and low fiber diet is the best way to heal.

**Abdominal Obstruction**: Many repeated bouts of diverticulitis can possibly lead to intestinal obstruction. This will result in scarring and muscle thickening which in turn will cause narrowing of the inside of the large intestine, which will block and prevent solid stool from going through. Partial blockage will require you to pick a date for a planned surgery, full blockage generally requires immediate emergency surgery.

**Abscess**: Diverticula pockets become filled with pus. Generally a simple treatment of antibiotics can get this under control, if it is more advanced the doctor may perform a percutaneous catheter drainage procedure to drain the abscess.

**Bleeding**: May begin when a blood vessel in the diverticulum ruptures coming out the anus. If the stool is black that is a sign that it coming from the left side of the colon. Bleeding will generally heal by itself, however if it doesn’t surgery may be required. Definitely contact your doctor if any bleeding should start.

**Peritonitis**: When the wall of a pus filled diverticulum ruptures it will leak the infected pus and blood into the abdominal cavity. This will require 2 surgeries to correct and repair. The first surgery will be performed to clean out the infected cavity, remove the damaged section of colon, and create a stoma in the stomach for a temporary colostomy this will give the colon time to heal and the inflammation to go down. The second surgery wis performed generally 10 – 12 weeks or even later, the surgeon will go back in to reconnect the colon and remove the stoma.

**Fistulas**: The grand daddy of all complications. These will usually form when the ruptured diverticulum is touching another organ in the area and proceeds to leak the intestinal contents and blood into the adjacent organ. The bladder is the most commonly affected area, however it can happen with the uterus, vagina, abdominal wall, between small and large intestines, even chest and thigh. Because this is more common with the bladder it could cause a long lasting urinary tract infection. This will require surgery similar to the peritonitis surgery.

Although these last two complications seem scary they are generally few and far between. With
that said take any sign very seriously and don’t try to self diagnose yourself. The quicker you set up the appointment with the doctor could save your life. To help yourself in avoiding these complications follow a self help approach to your diverticular disease and stay very pro-active with your doctors in you medical decisions.