A diverticulitis flare up generally occurs in an average of 15 – 25% of people who actually have diverticulosis.

And out of that maybe 1 in 12 (less than 8%) will have the need for surgery, whether it is elective or emergency. With these numbers it helps to know and understand when surgery is usually recommended and what these surgeries entail. Sometimes when a patient may have such severe diverticular disease their surgeon may recommend planning ahead for surgery, this is generally done to avoid the higher risk involved after the complications have set in.

There are certain conditions that may justify elective surgery for those patients who have one or more of the following, and certain conditions that will warrant emergency surgery:

- Two or more severe attacks of diverticulitis when over 50
- One severe attack of diverticulitis for someone under 50
- When treatment does not get rid of a painful mass
- X-ray showing suspicious changes in the sigmoid colon sometimes narrowing (could suggest a sign of cancer).
- A partially blocked colon also known as a stricture
- When considering a future pregnancy
- When a patient begins to regularly experience painful urination or urinary infections, sign of a fistula between the colon and the bladder
- When problems of the colon bleeding occurs repeatedly.
- When the patients diverticular disease appears to be progressing rapidly.
- A fistula (abnormally opening) has formed between the colon and a neighboring organ, generally the uterus, bladder, or vagina.
- Possible signs of cancer that other testing cannot confirm.
- An infection that is spreading through the blood to other parts of the body which is know as sepsis.
- A bowel obstruction which is when the colon is blocked.
- An infection is spreading into the abdominal cavity through a perforation of a diverticulum pouch, this is known as peritonitis.
- A diverticulum pouch has a pocket of infection forming called an abscess. In some cases these can be drained without the need of a major surgery.
- When severe bleeding will not stop with any treatment received through a colonoscopy or angiogram.
When the word surgery is mentioned it’s no doubt that many people will become quite tense. Depending on the severity of your particular case will determine the intenseness of the actually procedure that will be needed to perform. I can’t stress enough now at this point how important the diet and exercise factor is to diverticular disease. For a few who have mild and brief attacks and are quite willing to stay with the lifetime dietary changes early, will be the ones with the highest chance of avoiding any surgery.

There are various surgeries for diverticulitis depending on the severity of each patient’s individual case. The simplest is the draining of an abscess, in which a needle is inserted through the abdomen and the infected pus is drained out. The most common is a partial colectomy aka colon resection where the surgeon removes the diseased part of the large intestine or the fistula and reconnects the remaining sections. Depending on the severity of a patient’s case a surgery could sometimes involve two operations. The first of the two surgeries clears the infected areas of the abdominal cavity, and remove the diseased part of the colon. Due to the infection and sometime an obstruction the surgeon will connect the end of the colon to a colostomy through the abdomen. And when the body is healed and ready the second operation will be performed to reconnect the colon.

No matter what the case it is of such importance to listen to your body and realize that preventive care will only decrease your chances of ever needing surgery, and keeps your intestines healthier.