Diverticulosis
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Diverticulosis overview - diverticulum is a sac-like protrusion that forms in the muscular wall of the colon, usually at sites where blood vessels enter the bowel. The diverticulum forms as a result of increased intraluminal pressure, a phenomenon thought to be due to low fiber diet dietary intake.

Colonic diverticulosis is a common disorder that affects many Americans. It affects up to 30% of patients by age 60 and as many as 65% of people by age 85. Throughout one’s life, the majority of patients remain asymptomatic with diverticulosis (70%); anywhere from 15 to 25% of patients with diverticulosis will develop diverticulitis (an infection associated with diverticulosis) and 5 to 15% will develop some form of diverticular bleeding.

Diverticulitis represents microscopic perforation of a diverticulum. This condition is thought to occur as the result of erosion of the diverticulum by increased intraluminal pressure or inspissated food particles/stool. In the western world, left lower quadrant pain is the most common symptoms in patients with diverticulitis. Other symptoms include concurrent nausea and vomiting, constipation, and fever. Almost all cases of diverticulitis occur in the left colon, most often in the sigmoid region. Interestingly, right-sided diverticulitis is much more frequent in the Far East.

Diverticular bleeding is painless and in the majority of cases self-limited. Approximately 5% of patients with diverticular bleeding develop hemodynamic instability from massive hemorrhage. The majority of affected patients are usually older than 60.

Treatments – people with diverticular disease who do not have symptoms require no specific treatment. However, most experts recommend increased dietary fiber to help bulk stools and to reduce intraluminal pressures within the colon. Although patients with diverticular disease have historically been advised to avoid whole pieces of fiber (such as seeds, corn, and nuts), there is no research evidence to support avoidance of such foods.

Increased dietary fiber may help to reduce the development of further diverticula in the colon. There is no evidence that increased dietary fiber decreases the likelihood or frequency of diverticulitis or diverticular bleeding.

The recommended amount of dietary fiber is 25 grams for women and 30 grams for men per day. Fruits, vegetables, and breakfast cereals are excellent sources of fiber. Other sources include unprocessed wheat bran and fiber supplements, including psyllium, methylcellulose, wheat dextrin, and calcium polycarbophil. The dose of fiber supplements should be increased slowly to prevent gas and cramping and the supplements should be taken with adequate fluid.

References
