Inflammatory Bowel Disease (Crohn's & Ulcerative Colitis)  
By Drew Nystrom L.Ac., CMT

Inflammatory Bowel Disease is a heading/umbrella that has other diseases underneath it. You may have heard of Crohn's Disease, Ulcerative Colitis and Irritable Bowel Disease. You may know someone who's been diagnosed with one of these or you may have had one of these unfortunate afflictions. In any case these can be serious debilitating conditions that sometimes require extreme care for severe cases but all require long term care. In this article I will discuss the differences and similarities between the three.

**Crohn's Disease:** A chronic inflammatory condition of the intestinal tract was first described by Dr. Burrill B. Crohn in 1932, along with Dr. Leon Ginzburg and Dr. Gordon D. Oppenheimer. Mostly affects the end of the small intestine called the “Ileum” and the beginning of the colon/large intestine “Cecum” but can effect the entire length of the GI tract. Crohn's disease can effect the entire thickness of the bowel wall leaving “skip lesions;” where as, Ulcerative Colitis only affects the superficial layer of the large intestine.

**Ulcerative Colitis:** A chronic inflammatory disease that effects only the Large Intestine (aka: colon). The lining of the colon becomes inflamed, and ulcerations occur which bleed and produce pus. The inflammation and the ulceration leads to spasms, cramping/pain and frequent bowel movements. Like Crohn's Disease Ulcerative Colitis is an autoimmune disorder where your body attacks itself.

<table>
<thead>
<tr>
<th>Crohn's Disease</th>
<th>Ulcerative Colitis</th>
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<tbody>
<tr>
<td>Symptoms related to inflammation of the GI tract:</td>
<td>Symptoms related to inflammation of the Colon:</td>
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<tr>
<td>• Persistent Diarrhea</td>
<td>• bowel movements become looser and more urgent</td>
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<tr>
<td>• Rectal bleeding</td>
<td>• persistent diarrhea accompanied by abdominal pain and blood in the stool</td>
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<tr>
<td>• Urgent need to move bowels</td>
<td>• stool is generally bloody</td>
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<tr>
<td>• Abdominal cramps and pain</td>
<td>• crampy abdominal pain</td>
</tr>
<tr>
<td>• Sensation of incomplete evacuation</td>
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<tr>
<td>• Constipation (can lead to bowel obstruction)</td>
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More severe symptoms:

<table>
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<th>Ulcerative Colitis</th>
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<tr>
<td>• Fissures in the lining of the anus (tears)</td>
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<tr>
<td>• Fistulas (tunnel from one loop of intestine to another or connects the intestine to the: bladder, vagina or skin)</td>
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General symptoms that may also be associated with IBD:

<table>
<thead>
<tr>
<th>Crohn's Disease</th>
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<tbody>
<tr>
<td>• Fever</td>
<td>• bowel movements become looser and more urgent</td>
</tr>
<tr>
<td>• Loss of appetite</td>
<td>• persistent diarrhea accompanied by abdominal pain and blood in the stool</td>
</tr>
<tr>
<td>• Weight Loss</td>
<td>• stool is generally bloody</td>
</tr>
<tr>
<td>• Fatigue</td>
<td>• crampy abdominal pain</td>
</tr>
<tr>
<td>• Night sweats</td>
<td></td>
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<tr>
<td>• Loss of normal menstrual cycle</td>
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Types of Crohn's Disease:
• **Ileocolitis**: The most common form of Crohn's, ileocolitis affects the end of the small intestine (the ileum) and the large intestine (the colon). Symptoms include diarrhea and cramping or pain in the right lower part or middle of the abdomen. This type is often accompanied by significant weight loss.

• **Ileitis**: This type affects only the ileum. Symptoms are the same as ileocolitis. In severe cases, complications may include fistulas or inflammatory abscess in right lower quadrant of abdomen.

• **Gastroduodenal Crohn's disease**: This type affects the stomach and the beginning of the small intestine (the duodenum). Symptoms include loss of appetite, weight loss, nausea, and vomiting.

• **Jejunoileitis**: This type is characterized by patchy areas of inflammation in the upper half of the small intestine (the jejunum). Symptoms include mild to intense abdominal pain and cramps following meals, as well as diarrhea. In severe cases or after prolonged periods, fistulas may form.

• **Crohn's (granulomatous) colitis**: This type affects the colon only. Symptoms include diarrhea, rectal bleeding, and disease around the anus (abscess, fistulas, ulcers). Skin lesions and joint pains are more common in this form of Crohn's than in others.

**Types of Ulcerative Colitis:**

• **Ulcerative Proctitis**: For approximately 30% of all patients with ulcerative colitis, the illness begins as ulcerative proctitis. In this form of the disease, bowel inflammation is limited to the rectum. Because of its limited extent (usually less than the six inches of the rectum), ulcerative proctitis tends to be a milder form of ulcerative colitis. It is associated with fewer complications and offers a better outlook than more widespread disease.

• **Proctosigmoiditis**: Colitis affecting the rectum and the sigmoid colon, the lower segment of colon located right above the rectum. Symptoms include bloody diarrhea, cramps, and a constant feeling of the need to pass stool, known as tenesmus. Moderate pain on the lower left side of the abdomen may occur in active disease.

• **Left-sided Colitis**: Continuous inflammation that begins at the rectum and extends as far as a bend in the colon near the spleen called the splenic flexure. Symptoms include loss of appetite, weight loss, diarrhea, severe pain on the left side of the abdomen, and bleeding.

• **Pan-ulcerative (total) Colitis**: Affects the entire colon. Symptoms include diarrhea, severe abdominal pain, cramps, and extensive weight loss. Potentially serious complications include massive bleeding and acute dilation of the colon (toxic megacolon), which may lead to an opening in the bowel wall. Serious complications may require surgery.

**Causes and who's affected:**

As many as, 700,000 Americans may be affected by Crohn's Disease and Ulcerative Colitis. It is equally common in men and women and while it can affect a person at any age there is a higher risk during the years from 18-35. The cause of IBD is not fully understood but there is a connection between diet and stress; as well as, hereditary, genetics and/or environmental factors that play a role in
the development of IBD. Studies have shown a greater risk of 5-20% increase in someone acquiring this Disease if a “first-degree” relative (parent, child, sibling) has it and an even greater chance if both parents have an IBD. Crohn's is most common among Eastern European backgrounds and an it is increasing in number of African Americans. Ulcerative Colitis is more common among European and Jewish background heritage. The environment that you put yourself in plays an important role as well. The occurrence is higher in “developed” countries than in “underdeveloped countries, higher in urban than rural, and in northern than southern climates.

Treatment with Chinese Medicine:

Due to the differential diagnosis that is applied in Chinese Medicine there are different “patterns” that exist when dealing with a disease. This is a similar idea to the different types of Crohn's Disease and Ulcerative Colitis described above. However, with Chinese Medicine, the patterns are based off of the symptoms the patient is currently experiencing as well as their history, their facial color, body odor, general demeanor, abdominal diagnostic, pulse diagnostic and tongue diagnostic. All of this information is compiled which leads to one of many “diagnostic patterns” to which the according acupuncture points, herbal formula, diet and lifestyle is prescribed. Chinese Medicine is a powerful therapy that can help treat severe cases and keep mild cases and patients who are in remission stay in remission.

Below are examples of some different patterns that could be “diagnosed” as Crohn's Disease or Ulcerative Colitis and what the treatment principle should be.

- **Spleen Qi Deficiency:** Intermittent dull abdominal pain that is alleviated with pressure, abdominal distention, early satiety, nausea, loose stools or diarrhea, loss of appetite, waxy pale or sallow complexion, fatigue, weakness, shortness of breath with exertion, spontaneous sweating, dizziness, and light headedness. Might have mild bleeding of dark, purplish blood, or less commonly, red blood preceding or following a bowel movement; or black, tarry, sticky, unformed stools; or occult blood in the stool discovered upon routine testing. There may be other signs of bleeding, such as heavy menstrual periods or easy bruising.
  - **Tongue:** pale and swollen, with toothmarks (or pale and thin with significant blood deficiency).
  - **Pulse:** Thready and weak or moderate.
  - **Treatment Principle:** Strengthen Spleen, supplement and elevate qi. Nourish Blood and stop bleeding.

- **Liver Qi invading the Spleen:** Recurrent Diarrhea which may be urgent and preceded by cramping abdominal pain. The pain is relieved following defecation. The diarrhea may alternate with constipation. Symptoms worse with stress and tension or eating. There is a possibility of mucus and blood in the stool. Other signs and symptoms include abdominal distension, poor appetite, nausea, heartburn, indigestion, borborygmus, flatulence and belching, which relieve abdominal discomfort, hypochondriacal discomfort, ache and tightness generally worse on the right side, irritability, depression, moodiness, shoulder and neck tension, temporal or tension headaches, cold fingers and toes, premenstrual syndrome and breast tenderness.
  - **Tongue:** normal or darkish body, or pale, or with slightly red edges: greasy coat especially over the root (depending on the degree of heat, deficiency and Dampness).
  - **Pulse:** Wiry
  - **Treatment Principle:** Harmonize the Liver and Spleen, regulate Liver qi, Support and strengthen Spleen, Alleviate spasm and pain, and stop diarrhea.
• **Blood Stagnation**: Chronic Diarrhea with a feeling of incomplete evacuation or tenesmus. The stools may be purple or black, sticky or tarry. The diarrhea may alternate with constipation. Fixed and localized, sharp or stabbing abdominal pain (usually in the lower left quadrant) which is worse with pressure. Dark complexion, dark rings around the eyes and purple nails. Spider naevi or vascular abnormalities over the abdomen, face and legs (particularly the inner knee and ankle).
  - **Tongue**: purple or with brown or purple stasis spots; sublingual veins dark and distended.
  - **Pulse**: wiry, choppy or thready.
  - **Treatment Principle**: Transform and eliminate stagnant Blood from the Intestines.

• **Damp Heat dysenteric disorder**: Frequent, foul smelling, explosive diarrhea with blood, mucus and pus: the mixture of mucus and blood will vary depending on the balance of Heat and Damp. Burning anus, tenesmus, colicky abdominal pain, abdominal distention, scanty concentrated urine, red complexion, red eyes, dry mouth, thirst (maybe with little desire to drink). In the early stages there may be fever and chills, headache and a floating pulse.
  - **Tongue**: greasy yellow coat; with more Heat a red tongue body and a dry coat; with more Dampness, a thick greasy tongue coat.
  - **Pulse**: slippery and rapid.
  - **Treatment Principle**: Clear Damp Heat from the Intestines and Regulate Qi and Blood, stop pain.

• **Spleen and Kidney Yang Deficiency**: Chronic and relentless diarrhea which is thin, watery and mucoid, and may contain pus and blood. In severe cases there may be incontinence of stools and rectal prolapse. The diarrhea is worse from exposure to cold and cold foods. Mild tenesmus or a dragging sensation in the lower abdomen, not relieved by diarrhea. Mild persistent abdominal pain, which is better with warmth and pressure. Loss of appetite, listlessness, fatigue, exhaustion, depression. A waxy pale or sallow complexion, cold extremities, cold intolerance, weakness and soreness of the lower back and legs.
  - **Tongue**: Pale and swollen with a thin white coat.
  - **Pulse**: deep, thready, weak and slow.

• **Yin Deficiency with Residual Damp Heat**: Chronic diarrhea with small quantities of sticky mucus and blood. Frequent urge to defecate but often in vain. Mild lower abdominal pain, tenesmus, loss of appetite, nausea, dry mouth and lips, thirst worse at night, afternoon or tidal fever that's worse at night. Heat in the palms and soles, nightsweats, flushing, emaciation, weight loss.
  - **Tongue**: red or scarlet and dry, with a greasy or peeled coat.
  - **Pulse**: thready and rapid.
  - **Treatment Principle**: Nourish and supplement yin and clear residual Damp Heat. Nourish and regulate Blood and stop dysentery.

• **Heart and Kidney Yin Deficiency**: Recurrent mouth ulcers, which appear in clusters and tend to aggregate on the tongue or tongue tip. The ulcers are painful and hot, with a narrow, slightly swollen, mildly red margin. They frequently recur and persist for up to several weeks before
resolving. Often of many years duration, the ulcers tend to be provoked or aggravated when the patient is stressed, anxious or upset. Nervous, anxious individual, insomnia, vivid dreaming, panic attacks, palpitations, forgetfulness, dizziness, tinnitus, lumbar ache, sensation of heat in the palms and soles, dry mouth and throat, night sweats.

- **Tongue:** red with little or no coat, redder at the tip.
- **Pulse:** Thready and rapid.

*Disclaimer: The information offered in this paper is not intended to diagnose but rather to inform the public about IBD and give a brief look at how Chinese Medicine looks at and treats IBD.*
References:
