

Patient information from BMJ

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Ulcerative colitis: what are the treatment options?

If you have ulcerative colitis your bowel becomes inflamed (swollen). This can cause unpleasant symptoms including pain and diarrhoea. But treatments can help control the condition.

What treatments work?

Ulcerative colitis is a condition that can cause inflammation of the bowel. A similar condition that you may have heard of is called Crohn's disease. These conditions are sometimes grouped together under the name inflammatory bowel disease.

We don't know for certain what causes ulcerative colitis, but it is probably what's called an autoimmune condition. This means that the body's immune system, which protects us against infection, goes wrong and starts to attack part of the body.

The treatment that you need will depend on how severe your symptoms are, and on how much of your bowel is affected. But most people will need long-term drug treatment to control the disease, and some people will need surgery.

Vaccinations

The main medicines used to treat ulcerative colitis work by calming down your immune system so that it doesn't attack your bowel. But it means that you are more at risk from certain infections. So your doctor will recommend that you have the following vaccinations:

- Influenza (flu)
- Pneumococcal polysaccharide. This protects against pneumonia, meningitis, and a type of blood poisoning called septicaemia
- Hepatitis B
- Human papillomavirus. This protects against genital warts and against cervical cancer in women
- Varicella zoster. You probably won't need this vaccine if you have ever had chickenpox or shingles.

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Drug treatments

The main medicines used to treat ulcerative colitis are called **5-aminosalicylic acids**, or **5-ASA** for short.

These medicines come as tablets. But if your symptoms are mild you may only need to take this medicine as suppositories. Suppositories are tablets that you insert into your rectum, and which then dissolve.

The advantage of suppositories over tablets that you swallow is that they are less likely to cause side effects. 5-ASA can cause side effects in some people, including headaches, nausea, abdominal pain, and vomiting.

If your symptoms are more severe you will need to take 5-ASA as tablets, and possibly as suppositories as well. You may also need to take medicines called **steroids**.

These are drugs that reduce inflammation. Their full name is corticosteroids. They are different from the anabolic steroids that some athletes and bodybuilders use.

Your doctor will usually make sure that you only take steroids for a few weeks, as taking them for a long time can cause side effects, including osteoporosis (weaker bones), thinning of the skin, and diabetes.

If you need to take corticosteroids regularly to control your symptoms, you have an increased chance of osteoporosis. This means that your bones are weaker than normal, and you may be more likely to get fractures.

Your doctor should discuss this with you, and how best to avoid fractures. He or she might suggest that you have regular tests to check if your bones are affected.

Some people have very severe symptoms, such as heavy or constant bleeding into their stools, passing stools more than 10 times a day, and severe pain.

If this happens to you, you will need urgent treatment in hospital. You may need to be given steroids through an intravenous (IV) drip to begin with. You may also need IV fluids if you have lost a lot of fluid through diarrhoea.

If 5-ASA and steroids don't control your symptoms well enough there are other medications your doctor can prescribe. For example, your doctor may suggest:

- a drug called ciclosporin, which helps to calm down your immune system
- a type of drug called a monoclonal antibody, which helps stop inflammation in the bowel, or
- a type of drug called a JAK inhibitor (the full name is Janus kinase inhibitor). This type of drug can help relieve symptoms for some people when other medications haven't worked well enough.

Surgery

Some people's bowel is so badly damaged by ulcerative colitis that they need to have a part or all of it removed. This operation is called colectomy. You may sometimes hear it called a bowel resection.

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Like all surgeries, this operation carries risks, such as blood clots in your legs (deep vein thrombosis or DVT) and infection. If your doctor thinks you might need this operation you can discuss it with him or her before deciding if it is the right treatment for you.

But some people's condition is so severe that this surgery may be the only option that is likely to help.

Treatment during pregnancy

Some ulcerative colitis medicines are fine to take during pregnancy, but others are not. If you become pregnant or are planning to become pregnant you should check with your doctor that your medicines are safe to take during pregnancy.

If you are planning to become pregnant your doctor might advise you to try to conceive at a time when you are not having a relapse of symptoms (this is called a period of remission).

But this is not always practical. Talk to your doctor about how you can have the safest pregnancy. This will include eating a healthy diet and making sure you take the supplements your doctor prescribes.

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