

A Short Note on Ulcerative Colitis

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DESCRIPTION

Ulcerative Colitis is a condition in which the mucosal layer of the large intestine becomes inflamed (colon). It is characterized by typical ulcers or open sores. The immune system is influenced by environmental, genetic, and microbial factors leading to dysregulated immune responses that cause persistent intestinal inflammation. Colitis can be either acute and self-limited or chronic. It comes into the category of digestive disorders. Ulcerative colitis is a non-specific, widespread inflammatory disorder of the large intestine with erosions and ulcerations that mostly affects the mucosa. Recurrent cycles of relapses and remissions characterize the disease, which is sometimes accompanied by extra-intestinal symptoms.

Signs and symptoms

The signs and symptoms of colitis vary widely, depending on the source of the disease and the factors that influence its progression and severity. Mild to severe colitis includes stomach aches and discomfort (depending on stage of disease), recurrent hemorrhagic diarrhoea with pus present or absent in the stools, faecal incontinence, fatigue, loss of appetite, and unexplained weight loss are all common symptoms. Shortness of breath, fast or irregular heartbeat, and a fever are some of the more serious symptoms. Arthritis, mouth ulcers, painful, red and swollen skin, and irritated, bloodshot eyes are some of the less common or rare non-specific symptoms that can accompany colitis. Colonic mucosal erythema (redness of the colon's inner surface), ulcerations, and haemorrhage are all signs found during a colonoscopy.

Diagnosis

The medical history, physical examination, and laboratory tests are used to diagnose the symptoms that may indicate colitis (electrolytes, stool culture and sensitivity, stool ova and parasites, etc). Medical imaging (e.g., abdominal computed tomography,

abdomen X-rays) and an examination with a camera inserted into the rectum are examples of additional tests (sigmoidoscopy, colonoscopy). Biopsy is a key part in the evaluation of colitis. During an endoscopy, a very small piece of tissue (typically approximately 2 mm) is taken from the gut mucosa and inspected under a microscope. It can reveal about the disease's etiology and the extent of intestinal damage.

Treatment

Depending on the results of the colonoscopy, some people may get admitted in the hospital. To speed up the healing of the colon, it is occasionally necessary to start the patient on a steroid. It may also be necessary to rehydrate the patient due to fluid loss and restore iron due to blood loss. After a hospital stay, the patient's chronic colitis may be treated with a daily medicine. An anti-inflammatory or immunosuppressive medicine may be used. There are a variety of medications available, and the healthcare professional will prescribe the one that shows best action. If the patient does not respond, new drugs will be tried until the medication that shows utmost action.

Furthermore, several recent studies have discovered a link between colitis and dairy allergy (including cow milk, cow milk UHT, and casein), implying that certain patients may benefit from a dairy elimination diet.

CONCLUSION

Early diagnosis of the disease can be treated easily. If left untreated or undetected, it can be lethal. Ulcerative colitis can be treated with the aim of eradicating the disease while minimizing morbidity and maintaining intestinal continuity. The patient should be provided with the appropriate medication and beneficiary foods that have been scientifically demonstrated to be useful. The surgical therapy of ulcerative colitis is determined by the patient's motivation, clinical presentation, and sphincter function.

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