INFLAMMATORY BOWEL DISEASES (IBD): A CASE REPORT

Dr. Sima Mohammad Al-Assaf and Dr. Saja Mohammad Al-Assaf

Abstract

Case Description: 28years old male Saudi medically free, coming through the ER complain of abdominal pain for about 3wks, associated with vomiting. There is loss of weight about (14kg) over 3-2 month. There is no (Diarrhea or change bowel habit). Also, the general systemic review is unremarkable. The patient is smoker. The family history is negative (there is no similar condition and there is no medical disease).

Physical Exam: The patient look unwell No (pale, jaundice or cyanosed). Chest: clear Cvs: normal, S1 + S2 +, No added sound Abdomine = lower quadrant tenderness (only) Vital Sign: temp = 36.8/RR=20/pulse=82) PB= 64/115 Hight: 1.00 weight: 1.00 Spo .99 ; BM1:4.06 R.B.S: 0

Discussion: Yet it is largely a hidden disease, and one that causes stigma, fear and isolation - it’s thought that many people with the condition go undiagnosed and suffer in silence. It doesn’t have to be like this. Crohn’s disease and ulcerative colitis are chronic (ongoing and life-long) conditions in which symptoms vary from person to person and will range ….

Treatment for crohn’s disease and ulcerative colitis depends on how severe the symptoms are, and how much of the gut is affected.

Conclusion:
1. It is idiopathic disease caused by a dysregulated immune response to host intestinal micro flora.
2. IBD complication: hemorrhage, perforation, fistula

Introduction:
Definition: it is idiopathic disease caused by a dysregulated immune response to host intestinal micro flora.

Types:
A) ulcerative colitis (uc) which limited to colon

Corresponding Author: Dr. Sima Mohammad Al-Assaf.
B) Crohn disease (Cd) which can affect any segment all see the gastrointestinal tract.

**The etiology of IBd:**
1) genetic predisposing.
2) an altered dysregulated immune response.
3) an altered response to gout.

**Complication:**
Hemorrhage, perforation, fistules, toxic mega colon, cholaugio carcinoma

**The annual incidence** of crohn disease was 5.0 per 100,000 person years in Asia and Middle East, where is incidence rate of (UC) were 24.3 per 100,000 person years in Asia and Middle East

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**Images 1:**
**On Abdominal Ultrasound:**
There is prominent thickening wall of caecum and distal ileum and appendix with prominent regional lymph nodes, Minimal intra-abdominal free fluid is seen
Management:
crohn’s disease is an immune system disease, it cannot be cured by medication or surgery. Treatment initially involves the use of medications to eliminate inflections, generally antibiotics, and reduce inflammation, generally aminosalicylate, anti-inflammatory drugs and corticosteroids. Surgery may be required for complications such as obstructions or abscesses.

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