

## Immunomodulation Treatment for Ulcerative Colitis

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### DESCRIPTION

Ulcerative colitis (UC) is an inflammatory bowel disease. It causes irritation, inflammation, and ulcers within the lining of your intestine (also called your colon). There is no cure, and other people usually have symptoms off and on for all times.

### IBD or IBS

Inflammatory bowel disease (IBD) may be a term mainly won't to describe 2 conditions that cause inflammation of the gut (gastrointestinal tract). They are: ulcerative colitis, Crohn's disease. IBD shouldn't be confused with irritable bowel syndrome (IBS), which may be a different condition and requires different treatment.

### SYMPTOMS

Ulcerative colitis symptoms can vary, counting on the severity of inflammation and where it occurs. Signs and symptoms may include: Diarrhea, often with blood or pus [1], Abdominal pain and cramping, Rectal pain, Rectal bleeding - passing bit of blood with stool, Urgency to defecate, Inability to defecate despite urgency, Weight loss, Fatigue, Fever.

### CAUSES

Genes you'll inherit a gene from a parent that increases your chance. Other immune disorders. If you've got one sort of immune disorder, your chance for developing a second is higher. Environmental factors. Bacteria, viruses, and antigens may trigger your system [2].

### DIAGNOSIS

A doctor will ask a few person's symptoms and medical record. They're going to also ask whether any close relatives have had colitis, IBD, or Crohn's disease. These include: blood tests, stool tests, X-ray. Barium enema, during which a healthcare professional passes a fluid called barium through the colon to point out any changes or anomalies during a scan [3].

Sigmoidoscopy, during which a healthcare professional inserts a versatile tube with a camera at the top, called an endoscope, into the rectum. Colonoscopy, wherein a doctor examines the

entire colon using an endoscope. A CT scan of the abdomen or pelvis.

A person with colitis will got to see a doctor who focuses on treating conditions of the gastrointestinal system, or a gastroenterologist. Complications of colitis include: primary sclerosing cholangitis - where the bile ducts inside the liver become damaged. An increased risk of developing bowel cancer. Poor growth and development in children and children. Also, a number of the medications wont to treat colitis can cause weakening of the bones (osteoporosis) as a side effect.

### TREATMENT

Both medications and surgery are wont to treat colitis.

Medications for treating colitis include 1) anti-inflammatory agents like 5-ASA compounds, systemic corticosteroids, topical corticosteroids, and 2) immunomodulators.

Anti-inflammatory medications that decrease intestinal inflammation are analogous to arthritis medications that decrease joint inflammation (arthritis). The anti-inflammatory medications that are utilized in the treatment of colitis are: Topical 5-ASA compounds like sulfasalazine (Azulfidine), olsalazine (Dipentum), and mesalamine (Pentasa, Asacol, Lialda, Apriso Rowasa enema) that require direct contact with the inflamed tissue so as to be effective.

Systemic anti-inflammatory medications like corticosteroids that decrease inflammation throughout the body without direct contact with the inflamed tissue. Systemic corticosteroids have predictable side effects with future use. Immunomodulators are medications that suppress the body's system either by reducing the cells that are liable for immunity, or by interfering with proteins that are important in promoting inflammation [4].

Immunomodulators increasingly are getting important treatments for patients with severe colitis who don't respond adequately to anti-inflammatory agents. Samples of immunomodulators include 6-mercaptopurine (6-MP), azathioprine (Imuran), methotrexate (Rheumatrex, Trexall), cyclosporine (Gengraf, Neoral).

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REFERENCES

1. Bowden TA, Aricescu AR, Gilbert RJ, Grimes JM, Jones EY, Stuart DI. Structural basis of Nipah and Hendra virus attachment to their cell-surface receptor ephrin-B2. *Nat Struct Mol Biol.* 2008;15(6):567.
2. Ang BSP, Lim TCC, Wang L. Nipah virus infection. *J Clin Microbiol.* 2018;56:e01875-01817.
3. MedScape. Nipah Virus Diagnosis and Treatment. 2020.
4. Bennet JE, Dolin R, Blaser M. *Zika Virus.* 2.