

Review of new evidence to treat colonic diverticulitis may help doctors

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Recent evidence and new treatments for colonic diverticulitis that may help clinicians manage and treat the disease are summarized in a review in *CMAJ (Canadian Medical Association Journal)*.

Diverticular disease, in which sac-like protrusions form in the wall of the colon, is common in developed countries, although it is increasing throughout the world, likely because of lifestyle changes. In people with the disease, about 25% will develop symptoms, which include abdominal pain and changed bowel habits, often leading to a diagnosis of [irritable bowel syndrome](#). The widespread use of colonoscopy has led to more diagnoses of "uncomplicated" [diverticulitis](#), that is, signs of diverticular inflammation without perforation of the colon, abscess or other complications.

Recent evidence indicates that inflammation after an acute episode is a risk factor for recurrence. Mesalamine may show promise in helping prevent repeat episodes, as recent preliminary studies indicate it is significantly better than placebo in preventing recurrence of diverticulitis. However, these results have been published only in abstract form. Probiotics may also show promise in treating the disease, although high-quality evidence is lacking.

"The pathophysiology of diverticular disease is extremely complicated because of the multifactorial contributing factors, including diet, colonic wall structure, intestinal motility and possible [genetic predisposition](#)," writes Dr. Antonio Tursi, Gastroenterology Service, Azienda Sanitaria

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"With recent advances in our understanding of this complex disease, new therapeutic approaches to the management of diverticulitis may further change practice."

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