

SUMMARY AND CONCLUSION

Ulcerative colitis is one of the chronic inflammatory bowel diseases which also include Crohn's disease.

Ulcerative colitis is an inflammatory ulcerating procsess of the colon presents with attacks of diarrhoea and passaga of blood and mucus per rectum.

Ulcerative colitis is of unknown aetiology share a number of clinical epidemiological, immunological and genetic features including extra – intistinal manifestations.

The Pathogenises of ulcerative colitis has been ascribed to genetic influnce, environmental factors or a combination of both it occurs with variable frequency in different populatiol while the prevalence rates are high in countries of Northern Europe, United states and other westernized lands they are much lower in Southern Europe, Asia and Africa.

Ulcerative colitis most commonly affects individuals in their second and forth decades but the disease can occurs in both children and elderly where it often assume a severe and active forms.

Ulcerative colitis characterized by periods of relapse and remission which may be separated by intervals of months or years presents by

attacks of diarrhoea, passage of blood and mucus per rectum with abdominal pain, loss of weight, anemia, pyrexia the patient passing up to 10:15 motions daily.

Diagnosis is done by the clinical picture and some investigations as sigmoidoscope, colonoscopy, barium enema, plain x ray, liver function test, stool culture.

Management of ulcerative colitis is mainly by:

a- Medical Management at first by:

fluid replacement, correction of anemia, adequate nutrition and steroid therapy. In long terms treatment by sulfasalazine, salicylates, topical steroid, systemic steroid. During acute ralapse with imunosupprisive drugs.

- b- Surgical management is indicated in severe cases in about 15 % of the patient which may be elective or emergency the surgical treatment is mainly to achive colectomy which include.
- 1- Panproctocolectomy with permenant ileostomy.
- 2-Total colectomy with ileorectal anastomosis.
- 3-Total colectomy with rectal mucosal stripping, ileal puch formation with ileanal anastomosis.