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## Is it just a tummy ache or inflammatory bowel disease?

### Gut check

Years passed before Danielle Graham's family discovered the "sensitive stomach" that ailed her as a child was a chronic intestinal tract disorder.

At 4, sleeping with antacids beside her bed, she "was the queen of eating Tums," Dina Graham, her mom, recalled.

Later the girl tried a series of food challenges because doctors suspected food allergies. Then came traces of blood in her stool, and eventually a 17-day hospitalization during her freshman year in high school.

By that time, the 5-foot-4 teen, who weighs 103 pounds now, was down to 80 pounds.

"She was dehydrated, she was malnourished," her dad, Dan Graham, remembered. "She was a mess." Danielle, now 16 and living in Sebastopol, Calif., was diagnosed with ulcerative colitis, a form of inflammatory bowel disease, or IBD.

One in 10, or 140,000, of the 1.4 million Americans with IBD is younger than 18 - the disease can show up as early as 18 months of age. Yet it's especially difficult to diagnose in children and adolescents, whose maturing bodies often need more aggressive treatment because the illness can stunt growth and delay puberty.

Fleeting viral infections cause most of the cramps, vomiting and diarrhea treated by pediatricians. So when IBD patients initially get examined for abdominal pain, fever and diarrhea, doctors rule out more common problems - constipation, food allergies, giardia, irritable bowel syndrome - before recommending more invasive procedures to check for IBD.

"For every kid who comes in complaining of a tummy ache, less than 1 percent of them turns out to have inflammatory bowel disease," said Dr. Leland Davis, a pediatrician in Santa Rosa, Calif. "You can't embark on a big expensive work-up, with a colonoscopy, on everybody who comes in with a bellyache."

The two most common types of IBD are ulcerative colitis and Crohn's disease, both marked by abnormal immune responses that can lead to ulcerations and bowel injury. Crohn's may involve inflammation of any part of the digestive tract, from the mouth to the anus, but most frequently affects the small intestine and colon, or large intestine. Colitis affects only the colon.

Juvenile arthritis, inflammation of the skin or eyes, and rectal bleeding may be other warning signs of IBD which, for one-fifth of patients, also afflicts at least one other family member.

On average, diagnosis of IBD takes three years from symptom onset, the Crohn's & Colitis Foundation of America reports.

"Often they're losing weight by the time they're sent to us," said Dr. Mel Heyman, a pediatric gastroenterologist at the University of California, San Francisco.

The causes and medical cures for IBD remain unknown, doctors and patient educators with the Crohn's & Colitis Foundation said. Surgical removal of the colon is the only cure for ulcerative colitis; and though surgery relieves some Crohn's complications, relapses are common.

The main drugs taken for IBD are 5-ASA agents, which includes including sulfasalazine, and corticosteroids, which can slow growth and trigger acne, pudgy "chipmunk" face, weight gain and mood changes.

Dr. Eva Szigethy, a child and adolescent psychiatrist who treats IBD-related stress and depression at Children's Hospitals in Pittsburgh and Boston, said her young patients rank four concerns among IBD's top challenges:

The hassles of taking medications daily, for some kids up to 20 pills a day.

Side effects of prednisone and other drugs prescribed for IBD.

Abdominal pain's interference with school, sports, extracurricular activities and time with friends.

Need for ready access to a bathroom because of frequent bowel movements, which causes some kids

to avoid group activities.

At an age when peer attachments and competition take on increased importance, Szigethy said, IBD can be "extremely difficult for boys, when they're a couple of years behind, they're shorter and not showing pubertal changes."

Szigethy recommends selectively choosing "trusted others" in whom to confide the IBD diagnosis.

"Kids often have a lot of conflict about, 'How much do I tell my teachers? Do I tell my friends? Do I tell my coach? I don't want to get kicked off the team,'" she said. "Some kids try to be so stoic, only their parents know."

Relaxation, guided imagery, yoga, meditation, weight lifting and listening to or performing music are among ways to release the stresses that aggravate IBD, Heyman and Szigethy said.

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