

Inflammatory bowel disease in the paediatric and adolescent age groups – a forgotten entity

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Introduction: Inflammatory bowel disease (IBD) is an uncommon disease in Sri Lanka but the prevalence appears to be increasing. However worldwide, it is still a rarity in the paediatric age group. Therefore in children it is often misdiagnosed or the diagnosis is often delayed until life threatening complications arise.

Objectives: To analyse the presentation, treatment and the outcome of IBD in children and adolescents referred to our unit. It is also our intention to make the medical community aware of the possibility of this condition occurring in Sri Lankan children.

Design, setting and methods: Analysis of the outcome of 8 children with IBD referred within a period of 18 months (Oct. 1998 to April 2000) is presented. All were subjected to full colonoscopic examination under general anaesthesia or intravenous sedation.

Results: Male to female ratio was 5:3. Median age was 7 years (range, 6 months –16 years). This included 7 patients with ulcerative colitis and 1 patient with Crohn's disease. The clinical presentations were loose stools (n=1), chronic blood and mucus diarrhoea (n=6), failure to thrive (n=2) and recurrent perianal sepsis (n=1). Delay in diagnosis ranged from 6 weeks to 4 years. Those with ulcerative colitis had involvement of left colon in 5 patients and total procto-colitis in 2 patients. All responded well to medical therapy. Two patients developed an acute relapse but none needed surgery to date.

Conclusions: Though the number of cases in our study are small, we consider 8 children with this rare pathology presenting within a period of 18 months very significant.

Therefore, inflammatory bowel disease should be entertained in the differential diagnosis of children with,

- i. a chronic diarrhoea, with or without blood and/or mucus.
- ii. recurrent perianal abscesses or fistulae.
- iii. failure to thrive.