

CHARACTERISTICS OF LOWER ABDOMINAL PAIN IN PATIENTS WITH DIVERTICULAR DISEASE AND OVERLAP WITH IRRITABLE BOWEL SYNDROME

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Poster

Colorectal

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A prospective registry study of 266 patients found that symptomatic uncomplicated diverticular disease and previous diverticulitis exhibit distinct abdominal pain patterns, with IBS overlap occurring in 28.2% of cases.

KEY POINTS

- IBS criteria were met by 37.2% of SUDD patients compared to 17.1% of PD patients ($p<0.001$), with diarrhoea-predominant IBS being the most common subtype.
- SUDD patients experienced more frequent episodes of long-lasting abdominal pain (6.6 vs 3.4 episodes, $p<0.001$) that was more often diffuse or right-sided, while PD patients had pain more frequently localized to the lower left abdomen.
- Long-lasting pain in PD patients was more often associated with fever, hospitalization, antibiotic therapy, medical consultations, and confinement to bed compared to SUDD patients (all $p<0.05$).
- SUDD patients reported better pain relief with antispasmodics (43.8% vs 36.1%, $p=0.003$) and more frequently experienced pain onset after acute gastrointestinal symptoms (90.8% vs 72.4%, $p=0.002$).
- Short-lasting abdominal pain episodes were more common in SUDD patients (90.5% vs 78.8%, $p=0.007$), though pain characteristics did not differ significantly between groups.

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