

Students with IBD: a guide for universities and colleges

Introduction

It is very likely that several students in your university or college will suffer from Ulcerative Colitis or Crohn's Disease, known collectively as Inflammatory Bowel Disease or IBD. IBD affects about one in 250 people in the UK population, and it is quite common for these illnesses to start in late teens and early adulthood.

IBD can make student life more demanding. Some understanding of the physical and psychological effects of IBD will help you to provide the support and encouragement students with IBD often need to achieve their full potential.

What are Ulcerative Colitis and Crohn's Disease?

Ulcerative Colitis is inflammation of the colon (large bowel) which causes ulceration and bleeding in the lining of the colon. **Crohn's Disease** is inflammation of the digestive tract, which can occur anywhere between the mouth and the anus, but most commonly affects the small bowel or the colon. Crohn's can damage all the layers of the lining and wall of the bowel.

These are lifelong illnesses which may have periods of remission when there are few symptoms, but also periods of relapse when the disease is active and the symptoms are much harder to cope with. There is no cure at present.

What they are not...

They are **not** the same as the more common Irritable Bowel Syndrome (IBS). They are **not** infectious.

What causes UC and Crohn's?

Although there has been much research, the cause of IBD is still uncertain. However, over the past few years, there

have been major advances, particularly in genetics. Researchers now believe that IBD is caused by a complex interaction of factors: the genes a person has inherited and an abnormal reaction of the immune system to certain bacteria in the intestines, triggered by something in the environment. Viruses, bacteria, the use of antibiotics, diet and stress have all been suggested as environmental triggers, but there is no definite evidence that any one of these is the cause of IBD.

What are the symptoms?

The common symptoms are:

- diarrhoea (sometimes bloody)
- urgent need to go to the toilet
- severe abdominal pain
- extreme tiredness
- nausea
- lack of appetite and weight loss

Some people with IBD also suffer from pains in their joints, eye problems, severe mouth ulcers, and skin rashes.

What can be the impact of having IBD?

Delays in development

Inflammation in the gut can affect both appetite and the absorption of nutrients, causing impaired growth. A young person with IBD may look and feel different from their peers - and may find themselves excluded from social activities and treated inappropriately for their age.

Effects of treatment

IBD generally requires life-long treatment, which can have unpleasant side effects. Treatment often includes corticosteroids (steroids) to reduce inflammation, and/or drugs that suppress the immune system.

Unwanted side-effects of steroids, especially at high initial doses, can include:

- significant weight gain
- roundness of the face
- acne
- mood swings, from euphoria to depression

NB These steroids are not the anabolic steroids sometimes used by athletes.

Other unwanted side effects from drugs used to treat IBD may include:

- headaches
- nausea
- flu-like symptoms

Some people take dietary treatment. This takes the form of a liquid diet consisting of all the nutrients needed. Usually, nothing other than the diet and water are allowed for weeks or months at a time. If they have difficulty drinking the feed, they may take it via a tube inserted through the nose down into the stomach. Once in place the tube can remain for many weeks. The high concentration of nutrients in the feed can sometimes cause nausea and headaches.

Hospitalisation

There may be times when a student experiencing a severe and acute flare-up of IBD needs treatment in hospital, sometimes lasting several weeks. In very severe cases, badly affected parts of the bowel may need to be removed by surgery. This sometimes involves an ileostomy (surgery to create an opening of the small bowel onto the surface of the abdomen) and wearing a stoma bag to collect waste (faeces). Ileostomies may be temporary but can be permanent.

Psychological effects

Young people with IBD are often at increased risk of depression and anxiety because of the unpredictability of their condition, the feelings of loss of control their symptoms can cause, and the adverse effects of IBD drugs. When chronic pain and exhaustion are ongoing, the student may be unable to concentrate, may feel depressed, and perhaps, in

extreme cases, have suicidal thoughts. Although stress is not a cause of IBD, a number of studies have shown that stress is often associated with relapses of the condition, especially at exam time.

It can be hard for young adults with IBD to have to cope with the embarrassment of their disease. They may dread having to rush for the toilet, having an accident, smells and any possible ridicule. They may feel distressed about being much smaller, thinner or less developed than their friends. Or, if they are taking high dose steroids for their treatment, they may become depressed about putting on weight and becoming fatter, round-faced and spotty. Changes in their perception of body image can lead to low self-esteem.

They may also feel isolated and out of step with their peers because of missing lectures or being unable to join in activities. It can be particularly difficult to cope with the unpredictability of IBD, which might mean feeling perfectly well one day, and utterly drained and exhausted the next. IBD is also an unseen condition, which can again be hard to manage. Someone with UC or Crohn's may not look that unwell to others, especially if they are taking steroids, when they are, in fact, feeling awful.

'I was experiencing diarrhoea with 20-40 bowel movements a day and felt tired most of the time, which caused me to fall asleep during some lectures. I spent 22 days in hospital ... I missed lectures, social life and coursework deadlines - so when I did get round to handing in my work it was capped to a low grade.'

[A student with severe IBD]

How can universities and colleges help?

By being aware of the difficulties and needs of students with IBD, and offering support where needed, staff at universities and colleges can make a real difference to the lives of students with these conditions. Some of the main areas where support might be required are listed below.

Respect and understanding

Each individual is unique, and students with IBD are likely to have differing views about how they wish to deal with their condition while at university or college. Some students may wish to keep their IBD entirely private, others may want to be completely open about their condition. It is very important that whatever their view, the student feels supported and knows that his or her position will be respected.

Access to Disability Services

Students with IBD may or may not consider that they have a disability. However, if they have severe UC or Crohn's Disease they may have needs which mean they might benefit from the support offered by Student Disability Services. For example, Disability Advisers can often:

- help with accommodation
- advise students about applying for Disabled Students' Allowance
- at some universities and colleges, draw up a general agreement outlining the student's extra support needs
- agree with the student what information about their condition may be shared with other university staff, and what will be kept completely confidential
- liaise with the student's department on their behalf

If it seems the student may be unaware of this, it may be helpful to flag up the kind of help and assistance that Disability Services can offer.

Accommodation

Many students with IBD consider ensuite accommodation a necessity. If this is not available then it helps if the student can have a room very close to a toilet and bathroom/shower. However, this is less satisfactory as without ensuite facilities there can still be the possibility of embarrassing accidents.

Other accommodation needs may include:

- living on or close to campus to help minimise travel needs
- convenient laundry facilities
- catering on site, or, alternatively,
- cooking facilities, which may make it easier for some students with IBD to meet their dietary requirements.

Departmental Support

Many students with IBD find it helpful to have someone within their academic department whom they can talk to about their IBD and some of the difficulties it might cause. This can apply even if the student has a Study Needs Agreement or something similar. If no personal tutor is available, please consider appointing another member of staff as a contact for the student.

Common IBD-related support needs

Students with IBD often have particular needs or difficulties such as the following:

- **Urgency problems.** Because of worry that a delay in getting to the toilet might result in an accident, students with IBD often prefer to sit close to the exit so that they can leave the room quickly. Students may also appreciate the use of a locker for spare clothes and washing kit, and/or permission to use staff toilets if these are available.
- **Lateness.** An urgent need for the toilet (particularly after food) may also lead to late arrival at seminars or lectures. Or, a student may arrive late because general fatigue or joint pains have made walking quickly difficult.

- **Medication and extra snack breaks.** Some students with IBD may need to take prescribed drugs at certain times of day. This may, on occasion, mean taking medication during lectures or seminars. Some will also need to eat at regular intervals, so may need extra meal breaks.
- **Feeling unwell.** Frequent pain and exhaustion affect concentration, so a student with these symptoms may need to return to their accommodation during the day. At other times they may be able to take a brief period of rest or a prescribed painkiller, and carry on.
- **Missing sessions.** A student may miss teaching sessions because of medical and hospital appointments, hospital admissions or being ill at home. If they are resting at home there may be times when they are still able to cope with most academic work. At other times, for instance during a relapse or when in hospital, they may not be able to manage as much.
- **Field trips.** Given the unpredictability of IBD it can be difficult for students with this condition to commit to going on a trip much in advance of the day itself. They may also be concerned about toilet facilities on the journey and at the field trip accommodation.

It is helpful if academic staff are aware of these sorts of needs, and can respond in a positive manner, for example:

- allowing students to leave and rejoin class sessions without comment
- not commenting on or penalising late arrival at lectures or seminars
- giving permission for the student to take a short break to take medication or to eat in class when necessary
- ensuring that the student is able to access assignments and lecture notes electronically if they are, for example, well enough to work from home but not to attend on campus lectures or seminars

- appreciating that IBD may mean that the student has to miss sessions, and being flexible with arrangements for them to catch up with, for example, practical or lab classes
- ensuring that suitable arrangements have been made if a student is expected to go on a field trip.

Coursework Extensions

At times when a student's IBD is causing particular trouble, they may be too tired to complete coursework on time. In such circumstances an extended deadline can be very helpful.

Exams

Studying for exams may also be very difficult and the student may need extra guidance and emotional support.

The fact that exams have to take place at fixed times puts additional pressure on students with a fluctuating and unpredictable illness like IBD. They may also have particular problems with morning exams if their bowels are most active then, as is often the case.

It can be helpful to seat the student close to the door nearest the toilets and to arrange in advance who will escort them to the toilets if they need to go urgently. Students with IBD may also need extra time to complete papers, if they have had to take several breaks or if they suffer from severe fatigue. Providing a separate exam room for such students can be a good way of meeting these needs without disrupting other students, provided the student with IBD is happy with this.

Occasionally a student with IBD may be completely unable to sit an exam. It is helpful if the university or college can then offer the opportunity to defer the exam, if possible with no cap on grades.

Extra Curricular Activities

Students with IBD may feel they are less able than other students to join in clubs and activities, however interested they may

be, because they are unsure about committing themselves. Any special encouragement or consideration that can be given will help their full involvement in college/university life.

Additional support

Financial support for HE students may be available through Disabled Student's Allowance (DSA) funding. For more information contact the university or college Student Disability Services or www.direct.gov.uk.

SKILL (the National Bureau for Disabled Students) is another useful source of information about disability related support. See www.skill.org.uk.

At Crohn's and Colitis UK we offer small welfare grants for young people with IBD aged 15-25 under our Educational and Vocational Support programme. Further information is available on our website, www.crohnsandcolitis.org.uk, and via the Crohn's and Colitis UK Information Line.

Students with IBD seeking psychological or emotional support might well benefit from being referred to university or college counselling services.

At Crohn's and Colitis UK we have a confidential support line, Crohn's and Colitis Support, for callers of any age. We also facilitate a website discussion forum 'IBD and me', specifically for 16- 29 year olds, which students may find useful. See www.ibdandme.nacc.org.uk.

Further Information

For further information on any aspect of IBD and for full details about our publications and services please contact: the **Crohn's and Colitis UK Information Line: 0845 130 2233, open Monday to Friday 10am - 1pm**. There is an answerphone service outside these hours or you may email info@crohnsandcolitis.org.uk. **Crohn's and Colitis Support, on 0845 130 3344, is open Monday to Friday 1pm - 3.30pm and 6.30pm - 9pm.**

This is a supportive listening service staffed by trained volunteers with personal experience of IBD.

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Crohn's and Colitis UK publications are research based and produced in consultation with patients, medical advisers and other health or associated professionals. They are prepared as general information on a subject with suggestions on how to manage particular situations, but they are not intended to replace specific advice from your own doctor or any other professional. Crohn's and Colitis UK does not endorse or recommend any products mentioned.

We hope that you have found the information helpful and relevant. We welcome any comments from readers, or suggestions for improvements. References or details of the research on which this publication is based, and details of any conflicts of interest can be obtained from Crohn's and Colitis UK at the address below. Please send your comments to Helen Terry at Crohn's and Colitis UK, 4 Beaumont House, Sutton Road, St Albans, Herts AL1 5HH, or email h.terry@crohnsandcolitis.org.uk

Crohn's and Colitis UK is the working name for the National Association for Colitis and Crohn's Disease (NACC). NACC is a voluntary Association, established in 1979, which has 30,000 members and 70 Groups throughout the United Kingdom.

Membership of the Association costs £12 a year. New members who are on lower incomes due to their health or employment circumstances may join at a lower rate. Additional donations to help our work are always welcomed.