Remission & IBD



Hear from an IBD Social Circle patient advocate on their experiences with remission and learn the facts about what this means in IBD.

I walked into the store with a friend, on a regular day for some regular shopping. She turned and asked me casually where the bathroom was, which can be a very normal question for two friends out and about. I paused and thought it over: I didn't know where the bathroom was.

Without noticing, I had stopped scanning for bathrooms everywhere I went. I hadn't been sticking to the familiar places as much, where I could beeline any time the feeling hit. I had been focusing on the experiences of being out and about, and less on the pending bowel movement that would inevitably hit out of nowhere.

That was one of the striking moments when I realized I was really in remission from years of living with ulcerative colitis. It wasn't a scope result or a biomarker score. It was forgetting where the bathroom was.

(The other thing for me? Eating a salad. Without pain. The best.)



Remission misconceptions

I first realized that this topic was misunderstood when talking to political staffers during Day on the Hill, an event where people living with IBD meet with lawmakers to discuss their experiences. It was a lightbulb moment at the right time because I was able to quickly explain that remission in IBD certainly doesn't mean the journey is over and that it's all of our responsibility to share what remission can look like.

What is remission in IBD?

Remission can be a confusing topic for patients with IBD. It's often looked at in a few categories:

- Clinical remission: IBD symptoms are under control.
- Mucosal healing: When no active disease or inflammation is visible during a colonoscopy.
- Histological remission: A lack of active disease or inflammation as analyzed at the tissue level (through biopsies taken as part of a colonoscopy)^{1,2}

Progress toward remission is measured across disease severity, location of inflammation, and response to medication. Often, the goal of improving these markers is to improve quality of life^{1,2}



Remission is important, so give yourself the best chance

It took me six years and several treatment changes to find remission, and now that I'm here, I've savored it for over a decade.

While these may not work for everyone, here are some of the things I did personally to set myself up for the best chance:

- I read about new treatment options and brought them up to my doctor
- When said doctor dismissed my questions and concerns, I switched to a different doctor who would listen and was an IBD specialist
- I worked to identify and manage stress, which was a trigger for my symptoms
- I stuck to my treatment plan and communicated to my doctor on how things were going³
- I found the right balance in exercise intensity to incorporate into a generally healthier lifestyle³





Talk to your doctor about steps you can take to put yourself in the best position to make remission possible.

There's no one way to achieve and maintain remission. For many, it can be as simple as identifying the right treatment, but for others the path may be more complex and require additional lifestyle changes, including diet.²

For me, remission is not just about my current health and reducing future risks for things like colon cancer—it's about having an extra zest for doing the things I want to do. I'm definitely a "yes" person, even more than before. I'm grateful for the perspective that chronic illness, and then remission, has given me.

Disclaimer: This resource was developed by an IBD Social Circle patient advocate who has been compensated for their time. This content is informational, does not reflect all patient journeys, is not intended to be taken as medical advice and should not replace the recommendations and advice of your healthcare provider.

References

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