

PREGNANCY AND IBD SURGERY

For some women, becoming a parent is something they've thought about their entire life. But, if you're living with inflammatory bowel disease (IBD) and have undergone surgery, you might have some additional concerns.

The *IBD Parenthood Project* is here to guide you through the process and the realities of becoming pregnant when you've undergone surgery.

1.6
MILLION

In the U.S., 1.6 million people have IBD, including Crohn's disease and ulcerative colitis (UC).^{1,2}



Of those 1.6 million people, approximately **25-35% of UC patients** and **70-90% of Crohn's patients** will need surgical intervention at some point during the course of their disease as it has the potential to dramatically improve quality of life.³

ENSURING A SUCCESSFUL PREGNANCY AND DELIVERY

If you've had an IBD surgery, you should work closely with your care team before trying to become pregnant. Both a gastroenterologist (GI), who has expertise in IBD, and an obstetric provider, ideally a maternal-fetal medicine (MFM) subspecialist, should be monitoring you, along with additional assistance from other care providers ([read our "Prepare for Better Care" factsheet for a full list](#)).⁴

INVOLVING YOUR SURGEON EARLY IN YOUR PREGNANCY IS IMPORTANT

You should also work with your MFM to determine the right delivery plan.⁴ In many cases, a C-section (cesarean) is best, but your GI or MFM will be able to advise you on this.⁴

LET'S LOOK AT THE MOST COMMON TYPES OF SURGERIES TO MANAGE CROHN'S DISEASE AND UC.

1

ILEOCOLONIC RESECTION

The terminal ileum is removed along with the last part of the small intestine and first part of the colon.^{5,6}

2

ILEOSTOMY

The ileum, or end of the small intestine, is brought through an opening in the abdominal wall to allow intestinal waste to drain out of the body.⁵

3

FISTULA REPAIR

The fistula tract is opened, and the diseased tissue is removed, or pus is drained.⁷

4

J-POUCH OR ILEAL POUCH-ANAL ANASTOMOSIS (IPAA)

The colon and the rectum are removed, with reconstruction of the rectum using the small bowel.⁸ The procedure may occur in one, two or three stages depending on your health.⁸ This surgery is typically performed on UC patients.⁹

5

LAPAROSCOPY

Special (fiberoptic) instruments are used in the abdomen through small incisions.¹⁰

6

LAPAROTOMY

The abdomen is opened up.¹¹

7

BOWEL RESECTION

Segments of the small intestine (jejunum, ileum) and/or large bowel (colon, rectum) are removed.¹²

8

ANASTOMOSIS

Two pieces of bowel are reconnected after a segment of diseased bowel is removed.⁵

9

COLOSTOMY

The colon is brought through an opening in the abdominal wall, usually on the lower left side of the abdomen.¹³

10

OSTOMY

(ALSO REFERRED TO BY YOUR GI AS A STOMA OR ILEOSTOMY)

Opening in the abdominal wall to allow digestive or urinary contents to leave the body.¹⁴

11

PROCTECTOMY

Removes all or part of the rectum.¹⁵

12

PROCTOCOLECTOMY

Removes the colon and rectum.⁵

THE IMPACT OF IBD SURGERY ON FERTILITY AND PREGNANCY

The good news is, laparoscopic procedures may improve fertility rates. In fact, studies show that up to 73% of patients were able to conceive successfully after a laparoscopic J-pouch surgery.¹⁶

If you have a proctectomy surgery with either a J-pouch reconstruction or permanent ostomy, you could experience some decreased fertility due to swelling and scarring of the fallopian tubes (adhesions from surgery).¹⁷

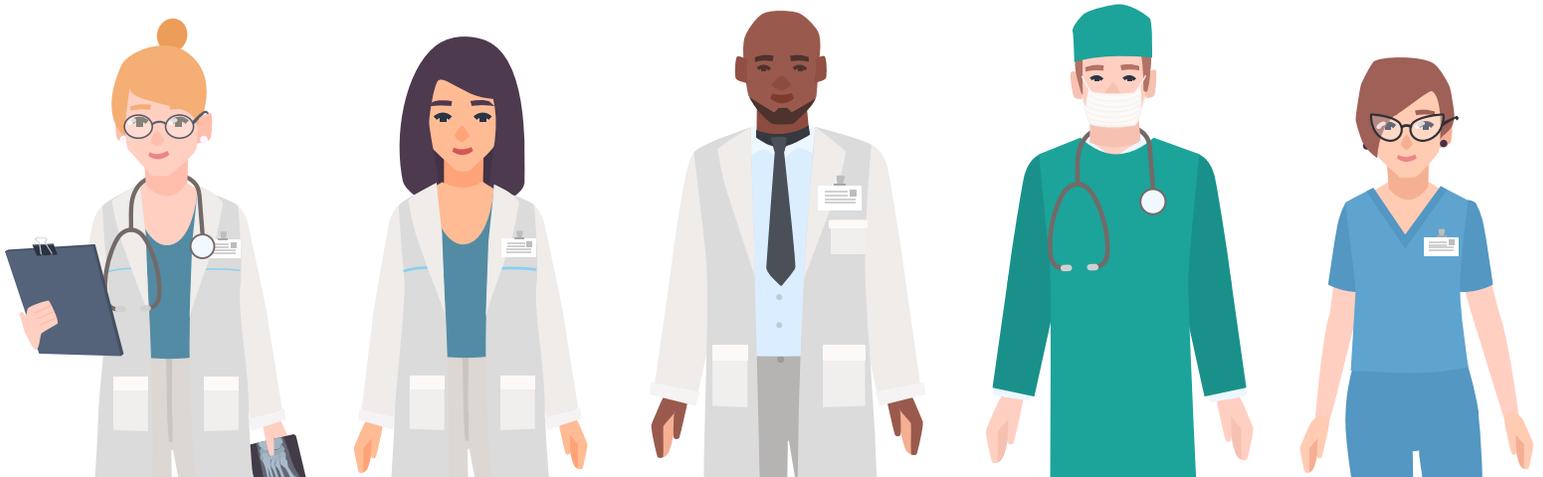
Though research shows that prior J-pouch surgery does not affect pregnancy outcomes,^{4,17} if surgery is not immediately necessary, and you plan to have children, you should talk to your doctor about the best time to schedule a procedure for your care.¹⁷

Also, women who have had an ileostomy can experience a drop or obstruction of the ileostomy during pregnancy.¹⁷ Waiting a year after your surgery lowers this likelihood.¹⁷

ADDITIONAL RESOURCES

The reality is, with proper planning and care, you can still have a successful pregnancy! Looking for more resources and helpful tips about IBD and pregnancy?

www.IBDParenthoodProject.org is a great place to start.



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