**Background**
- Diverticulosis is a digestive condition in which small pouches (diverticula) protrude from the walls of the large intestine, without symptoms.
- About 10–15% of people with diverticulosis develop symptoms.
- Diverticular disease is the presence of diverticula with mild abdominal pain or tenderness.
- Acute diverticulitis is inflammation or infection of diverticula. Symptoms include constant abdominal pain, usually severe and on the lower left side, fever and bowel symptoms.
- Complications of acute diverticulitis include perforation, abscess, sepsis, haemorrhage, fistula and obstruction.

**Diet and lifestyle**
Give advice on:
- Eating a healthy, balanced diet including whole grains, fruit and vegetables.
- Increasing fibre intake for people with constipation and a low-fibre diet.
- Drinking adequate fluids.
- The benefits of exercise, weight loss and stopping smoking.

**Microbiological testing**
If a diverticular abscess greater than 3 cm is drained, send pus samples to the microbiology laboratory and tailor antibiotic therapy to the results.

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**Diverticular disease: antimicrobial prescribing**

**Acute diverticulosis**
- Systemically unwell or immunosuppressed or with significant comorbidities but does not meet the criteria for referral for suspected complicated acute diverticulitis.
- Systemically well
  - Hospital management of suspected or confirmed complicated acute diverticulitis, including suspected diverticular abscess.
  - Review within 48 hours or after scanning if sooner, and consider switching to oral antibiotics when possible.
  - If uncomplicated acute diverticulitis is confirmed by scanning, review the need for antibiotics and discharge.
  - If diverticular abscess is not confirmed by scanning, review the need for antibiotics.
  - For diverticular abscesses less than 3 cm, switch to oral antibiotics where possible.

**Diverticulosis or diverticular disease**
- Do not offer antibiotics.
- Offer oral antibiotics.
- Consider not prescribing antibiotics.
- Offer IV antibiotics.

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**Advise on:**
- Diet and lifestyle.
- The course of the disease and the likelihood of progression.
- Symptoms and symptom management (for example, paracetamol for pain and bulk-forming laxatives for constipation or diarrhoea).
- Symptoms that indicate complications or progression.
- When and how to seek medical advice.

For people with acute diverticulitis, also advise on:
- Possible investigations and treatments.
- The risks of treatments and how invasive these are.
- The role of surgery and outcomes.

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For other treatment options, including surgery and emergency management for complicated acute diverticulitis, see the NICE guideline on diverticular disease.