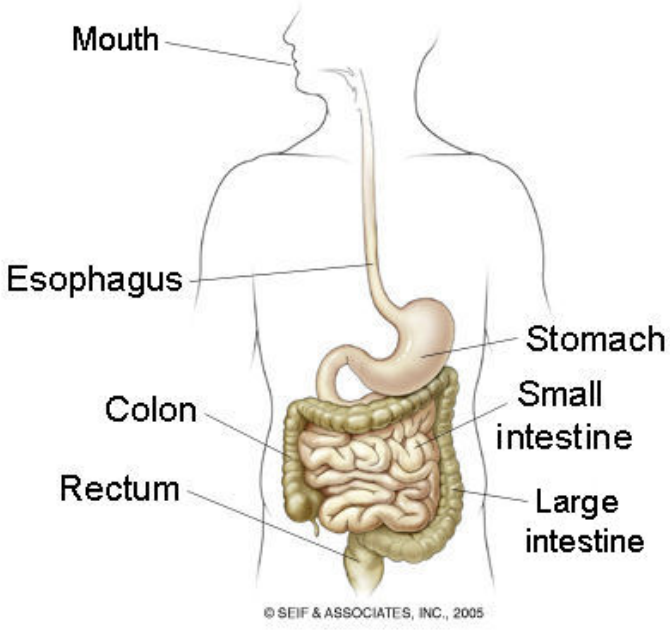
Hemorrhagic Colitis

Hemorrhagic colitis is an inflammation of the large bowel. It is caused by a germ called Escherichia coli (E. coli) especially the E. coli type O157:H7. This germ makes a toxin which can cause damage to the lining of the intestines. This damage causes a bloody diarrhea and other problems. Some of them may be serious. If the toxin enters the blood stream, it may damage other organs such as the kidneys. This illness is most common in children and older people.



CAUSES

A common strain of E. coli that causes hemorrhagic colitis is found in the gut (*intestines*) of healthy cattle. Because of this, you put yourself at risk for this illness when eating undercooked beef, especially ground beef, and drinking unpasteurized milk. It is also passed from person to person.

SYMPTOMS

Some of the most common problems are:

- Harsh abdominal cramps.
- Watery diarrhea. This usually progresses to bloody diarrhea within one to two days.
- Low-grade fever which is present in about 2 out of 3 people.

DIAGNOSIS

- Your caregiver may suspect this if you have bloody diarrhea.
- To make the diagnosis, stool specimens are tested for E. coli.
- Colonoscopy is sometimes used to help with the diagnosis. This is a procedure in which your caregiver looks at your colon through a flexible tube much like a thin telescope.

TREATMENT

The most important part of treatment is drinking enough fluids. Sometimes fluids are replaced intravenously if oral intake cannot keep up. The diet should be kept bland. See below. Antibiotics are not given. Antibiotics kill germs, but they increase the risk of developing hemolytic-uremic syndrome. People who develop complications are likely to require intensive care in the hospital. They may need kidney dialysis.

Until your diarrhea is under control, you should drink clear liquids frequently, in small amounts. Clear liquids include: water, broth, apple juice, weak tea, and 7-Up®.

AVOID:

- Milk.
- Fruits.
- Extremely hot or cold fluids.
- Alcohol.
- Tobacco.
- Too much intake of anything at one time.

When your diarrhea stops, add the following bland foods. They help the stool to become more formed.

- Rice.
- Bananas.
- Dry toast.
- Apples without the skin.

Once these foods are tolerated, you may add low-fat yogurt and low-fat cottage cheese. They will restore the normal bacterial balance in your bowel.

- Wash your hands well to avoid spreading any bacteria or virus.
- Most people who get this will recover without problems.

- The diarrhea usually lasts 1 to 8 days. Fever is usually absent or mild.
- About one out of twenty people with hemorrhagic colitis develop a severe complication called hemolytic-uremic syndrome. This is a sudden kidney (*renal*) failure. Symptoms of this may include anemia, fatigue, weakness, and light-headedness. This is caused by the damage to the red blood cells. Low platelet counts (*thrombocytopenia*) may cause bleeding. Some people with this syndrome develop complications of nerve or brain damage. This may include seizures or stroke. These complications typically develop in the second week of illness and may be preceded by increasing fever. Hemolytic-uremic syndrome is more likely to occur in children younger than 5 years and in older people. Even without the complications of hemolytic-uremic syndrome, it may cause death in older people because of the dehydration from severe diarrhea.

SEEK IMMEDIATE MEDICAL CARE IF:

- You are unable to keep fluids down.
- Vomiting or diarrhea becomes worse or is persistent.
- Belly (*abdominal*) pain develops, increases or localizes. (Right sided pain can be appendicitis. Left sided pain in adults can be diverticulitis).
- You develop a high fever. This is an oral temperature above 102º F (38.9º C).
- Diarrhea becomes excessive or contains blood or mucous.
- You develop excessive weakness, dizziness, fainting or extreme thirst.

Checking weight 2 to 3 times per day in babies and children will help verify adequate fluid replacement. Your caregiver will tell you what loss should concern you or suggest another visit to your personal physician.

Weigh your child today. Compare this to your home scale and record all weights and time and date weighed. Try to check weight at the same times every day. Bring this chart to your caregivers if you or your child needs to be seen again.

Document Released: 12/18/2006 Document Re-Released: 03/16/2010
ExitCare® Patient Information ©2011 ExitCare, LLC.