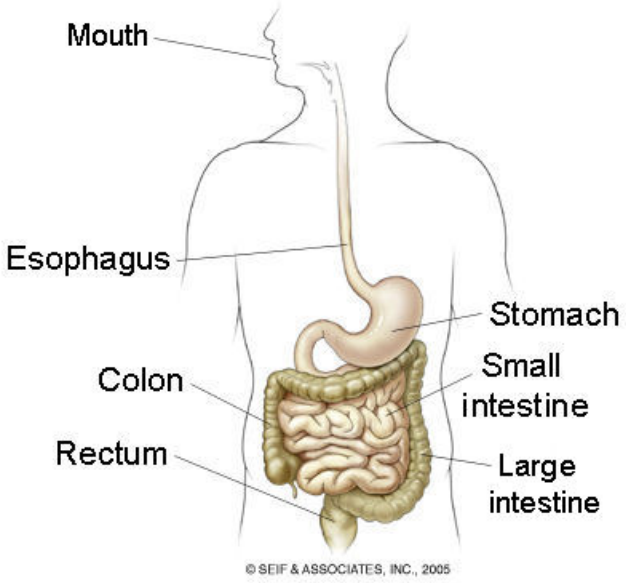
Collagenous Colitis, Lymphocytic Colitis

Inflammatory bowel disease is a general name for diseases that cause inflammation in the intestines. Collagenous colitis and lymphocytic colitis are two types of bowel inflammation that affect the large intestine (*colon*). They are not related to more severe forms of inflammatory bowel disease (*Crohn's disease* or *ulcerative colitis*).



CAUSES

No precise cause has been found for collagenous colitis or lymphocytic colitis. Possible causes include:

- Bacteria and their toxins.
- Viruses.
- Nonsteroidal anti-inflammatory drugs (NSAIDs).

Some researchers have suggested that collagenous colitis and lymphocytic colitis result from an autoimmune response. This means that the body's immune system destroys cells for no known reason.

SYMPTOMS

- The symptoms are similar for both; chronic watery, non-bloody diarrhea.
- The diarrhea may be continuous or episodic. Abdominal pain or cramps may also be present.

DIAGNOSIS

The diagnosis of collagenous colitis or lymphocytic colitis is made after tissue samples are taken during colonoscopy or flexible sigmoidoscopy. These are tests that use tools to look inside your colon without having to operate. Samples taken from your colon are examined under a microscope.

- Collagenous colitis is characterized by collagen deposits inside the lining of the colon. Multiple tissue samples from different areas of the colon may need to be examined. People with collagenous colitis are most often diagnosed in their 50's, although some cases have been reported in adults younger than 45 years and in children aged 5 to 12. It is diagnosed more frequently in women than men.
- In lymphocytic colitis, tissue samples show inflammation with white blood cells, known as lymphocytes, between the cells that line the colon. In contrast to collagenous colitis, there is no abnormality of the collagen.

TREATMENT

Treatment depends on the symptoms and severity of the cases. The diseases have been known to resolve by themselves, but most patients have recurrent symptoms.

- Lifestyle changes aimed at improving diarrhea are usually tried first. They include:
  - Reducing the amount of fat in the diet.
  - Eliminating foods that contain caffeine or lactose.
  - Not using NSAIDs.
- If lifestyle changes are not enough, medicines are often used to control the symptoms. They include:
  - Anti-diarrheal medicines.
  - Anti-inflammatory medicines.
  - Immunosuppressive agents, which reduce the autoimmune response. This medicine is rarely needed.
- For very extreme cases, bypass of the colon or surgery to remove all or part of the colon has been done in a few patients. This is rare.
- Collagenous colitis and lymphocytic colitis do not increase the risk of colon cancer.

FOR MORE INFORMATION

Crohn's & Colitis Foundation of America Inc.
386 Park Avenue South, 17th floor
New York, NY 10016-8804
Phone: 1-800-932-2423 or (212) 685-3440
Fax: (212) 779-4098
Email: info@ccfa.org
Internet: www.ccfa.org

The NDDIC is a service of the National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health

National Digestive Diseases Information Clearinghouse
2 Information Way
Bethesda, MD 20892-3570
Email: nddic@info.niddk.nih.gov

Information courtesy of the NIH. NIH Publication No. 03-5036

Document Released: 11/17/2005 Document Re-Released: 01/09/2011

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