Collagenous Colitis Associated with Protein-losing Enteropathy

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Picture 1.

Picture 2.

Picture 3.

Picture 4.

An 82-year old woman was admitted with a one-week history of nausea, appetite loss and diarrhea. The medications that she had been taking included aspirin and lansoprazole. On examination, a bilateral pitting edema was observed in the lower extremities. Serum albumin level was

1.6 g/dL, but there was no proteinuria, liver dysfunction, or any sign of hypermetabolism. Protein leakage from the small intestine and colon was suspected. This suspicion was

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confirmed by ^{99m}Tc -human serum albumin scintigraphy (Picture 1). A colonoscopy was performed, revealing diffuse edema throughout the colon (Picture 2). A biopsy of the ascending colon showed subepithelial collagen bands and inflammation of the lamina propria (Picture 3: Hematoxylin and Eosin staining, Picture 4: Masson trichrome staining). The administration of aspirin and lansoprazole was discontinued. After treatment with loperamide, there was an improvement of the patient's symptoms and serum albumin level. This was a rare presentation of collagenous colitis, with an acute onset and associated protein-losing enteropa-

thy (1, 2).

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References

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