

Microscopic Collagenous Colitis



What is microscopic collagenous colitis?

The term “colitis” simply means inflammation of the colon. Microscopic colitis (MC) only affects the colon, also called the large intestine, a portion of the bowel about five feet long. Scientists think that some people may develop an abnormal immune response to things that would normally be harmless, such as food, medicines, and “good” bacteria. These immune responses cause the colon to become inflamed and irritated from an overproduction of white blood cells.

Microscopic collagenous colitis occurs when the colon inflammation causes an abnormal, thicker collagen layer to develop in the large intestine. Collagen is a structural protein found in the lining of the colon and is a strong, netlike substance that holds cells together. When foods pass through the inflamed colon, two things happen: nutrients cannot be properly absorbed, and the colon irritation continues.

Who gets microscopic colitis and why?

The actual cause is unknown, but scientists believe that some people develop the condition due to genetic factors, while others may develop MC after being exposed to a bacterial disease. Certain foods and medications also have been linked to MC. Another theory is that some people develop an allergy to their own “good” bacteria in the intestines, and this causes the abnormal immune response.

Microscopic colitis is most commonly found in people age 45 and over, but more women than men seem to have collagenous colitis.

How is microscopic colitis diagnosed at the lab?

Healthcare providers may examine the large intestine using a sigmoidoscope or colonoscope, a thin, flexible tube with a tiny video camera. Because the

characteristics of MC only affect the cells that make up the lining of the colon, also called the epithelium, a sample (biopsy) may be taken.

Tissue samples removed during a colonoscopy are sent to a pathology lab. There, the tissue is prepared on glass slides and reviewed by a pathologist (a doctor who has specialized in the microscopic diagnosis of disease), preferably one who focuses on diseases of the digestive tract.

The pathologist views the tissue under a microscope looking for abnormal cellular changes, including whether an increased

number of collagen fibers are evident underneath the epithelial lining.

The pathologist interprets the findings in the context of the clinical information provided by the patient’s healthcare provider. At Inform Diagnostics, difficult and unusual cases are reviewed

together by our specialists at large multi-headed microscopes to ensure the most accurate and definitive diagnoses.

The pathologist creates a pathology report with all the important findings to help the healthcare provider decide treatment.

How is microscopic collagenous colitis treated?

Collagenous colitis can be treated a number of ways. Antidiarrheal medications that contain bismuth and loperamide work for many patients. Other people may require a corticosteroid, such as budesonide, to effectively control their symptoms. Cholestyramine, a medicine that is used for other gastrointestinal problems, also can be effective for this condition. Some patients find it beneficial to eliminate foods that seem to cause irritation and an increase in diarrhea symptoms, such as fatty foods, caffeine, and foods containing lactose.



Collagenous colitis is an inflammatory condition of the colon that can only be correctly diagnosed by looking at intestinal tissue samples under a microscope.

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Learn more!

These resources provide more information about microscopic colitis and associated risks:

<http://microscopiccolitis.org>

Informational articles and online support forums for individuals suffering from MC and other inflammatory bowel diseases.

<http://www.microscopiccolitisfoundation.org>

The Microscopic Colitis Foundation raises public awareness of microscopic colitis to encourage research, and to inform and support patients, caregivers, and medical professionals about the management of this condition.

This material is intended for patient education and information only. It does not constitute advice, nor should it be taken to suggest or replace professional medical care from your healthcare provider. Your treatment options may vary, depending upon medical history and current condition. Only your healthcare provider and you can determine your best option.

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Inform Diagnostics continuously improves diagnostic precision through a unique consensus approach, rigorous quality assurance, comprehensive expertise, ongoing education and research, and close relationships with clinician clients.



Find more patient information and resources on our website at www.InformDiagnostics.com.