

#30 - IS MICROSCOPIC COLITIS RESTRICTED TO COLON? STUDY OF ILEAL CHANGES IN PATIENTS WITH MICROSCOPIC COLITIS

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Introduction: Microscopic colitis (MC) is truly a disease of the era of modern fiberoptic endoscopy. However, involvement of the terminal ileum (TI) rarely been systematically studied and the association of collagenous ileitis (CI) and MC is not reported.

Objective: The aim of this study was to investigate the TI mucosal histomorphologic alterations and to determine the association of CI in cases of MC.

Methods: In this prospective study TI mucosa of 55 patients with MC (37 with lymphocytic colitis [LC: male/female ratio 2.7, median age 37 years] and 18 with collagenous colitis [CC: male/female ratio 1.6, median age 37 years]) were examined for TI mucosal alterations. Results were compared with 36 patients with ulcerative colitis (UC) as controls.

Results: The TI mucosal biopsies revealed varied histologic pattern with normal mucosa in 5 (9%), intraepithelial lymphocytosis without crypt hyperplasia 24 (43.6%), intraepithelial lymphocytosis with crypt hyperplasia 14 (25.5%), villous atrophy 6 (11%), villous atrophy with CI 2 (3.6%) and CI without villous atrophy in 4 (7.3%) patients. Overall 6 (10.9%) cases of MC were associated with CI. Out of 8 (14.5%) cases with primary ileal villous atrophy 6 were associated with LC and 2 were associated with CC and both had associated CI. All cases with LC revealed intraepithelial lymphocytosis and/or associated villous atrophy where as 6 (33.3%) cases of CC were associated with CI.

Conclusions: Terminal ileum is frequently involved in patients with MC. Collagenous ileitis is commonly associated with CC. The results suggest that the TI may be involved by a similar pathogenic process as the colon in LC and CC.