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Ischemic colitis as a rare complication of colonoscopy

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We report a 59 year old man with controlled hypertension, diabetes mellitus and irritable bowel syndrome who was visiting surgical clinic for Per-rectal bleeding secondary to piles. He was referred for colonoscopy to rule out any other colonic pathologies. A colonoscopy was done on March 27, 2016 that revealed two small colonic polyps with no other mucosal pathology. Biopsy of one polyps showed tubular adenoma. He started to have abdominal pain the 2nd day post colonoscopy. This pain was dull aching moderate to severe associated with intermittent Per-rectal bleeding. The pain was attributed to Irritable Bowel syndrome (although this pain was different from the pain he used to have before) and the Per-rectal bleeding was attributed to piles. Despite the fact that he was operated for piles three weeks later, he continued to complain of abdominal pain with recurrent visits to Emergency room and out-patients clinic. A repeat colonoscopy was done three weeks post operation to assess the cause for the continued abdominal pain and the Per-rectal bleeding. The second colonoscopy showed severe colitis involving upper sigmoid, descending colon and distal transverse with sloughed mucosa and black spots. The histology was consistent with ischemic colitis. He had chronic course with pain required recurrent admissions with conservative treatment, he refused surgical intervention. He improved very slowly. A third colonoscopy with biopsy after 19 months showed completely normal mucosa with normal histology. This case represents a rare cause of ischemic colitis precipitated by colonoscopy. The clinician should be aware of such scenario if patient continues to have unexplained abdominal pain post colonoscopy. There are few cases reported in the literature. No reported case from the kingdom.

Biography

Wadha Rashed Al Subaiee is a Junior Resident (R2) internal medicine. She is interested in gastroenterology. She is working at the National Guard Hospital.

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