

Colonic Varices: What are the Therapeutic Options?

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INTRODUCTION

- Colonic varices are a rare cause of lower gastrointestinal bleeding (LGIB) with an incidence of 0.07%. The most common sites of colonic varices are the rectum and cecum.
- Colonic varices are diagnosed by colonoscopy, mesenteric angiography, or computed tomography (CT) scans.
- Currently, there are no standardized therapies for treatment of colonic varices due to the heterogeneity in localization and vascular anatomy.
- We present a case of lower gastrointestinal bleeding due to an ascending colon varix.

THE CASE

- A 38 y/o man with a history of decompensated alcoholic cirrhosis complicated by esophageal and gastric variceal bleeding requiring balloon-occluded retrograde transvenous obliteration one month ago was transferred from an outside hospital (OSH) for liver transplant evaluation and hematochezia.
- Colonoscopy from the OSH showed an ascending colon varix with white nipple sign.
- Vital signs were normal. Physical exam was pertinent for scleral icterus and spider angiomas on the chest.

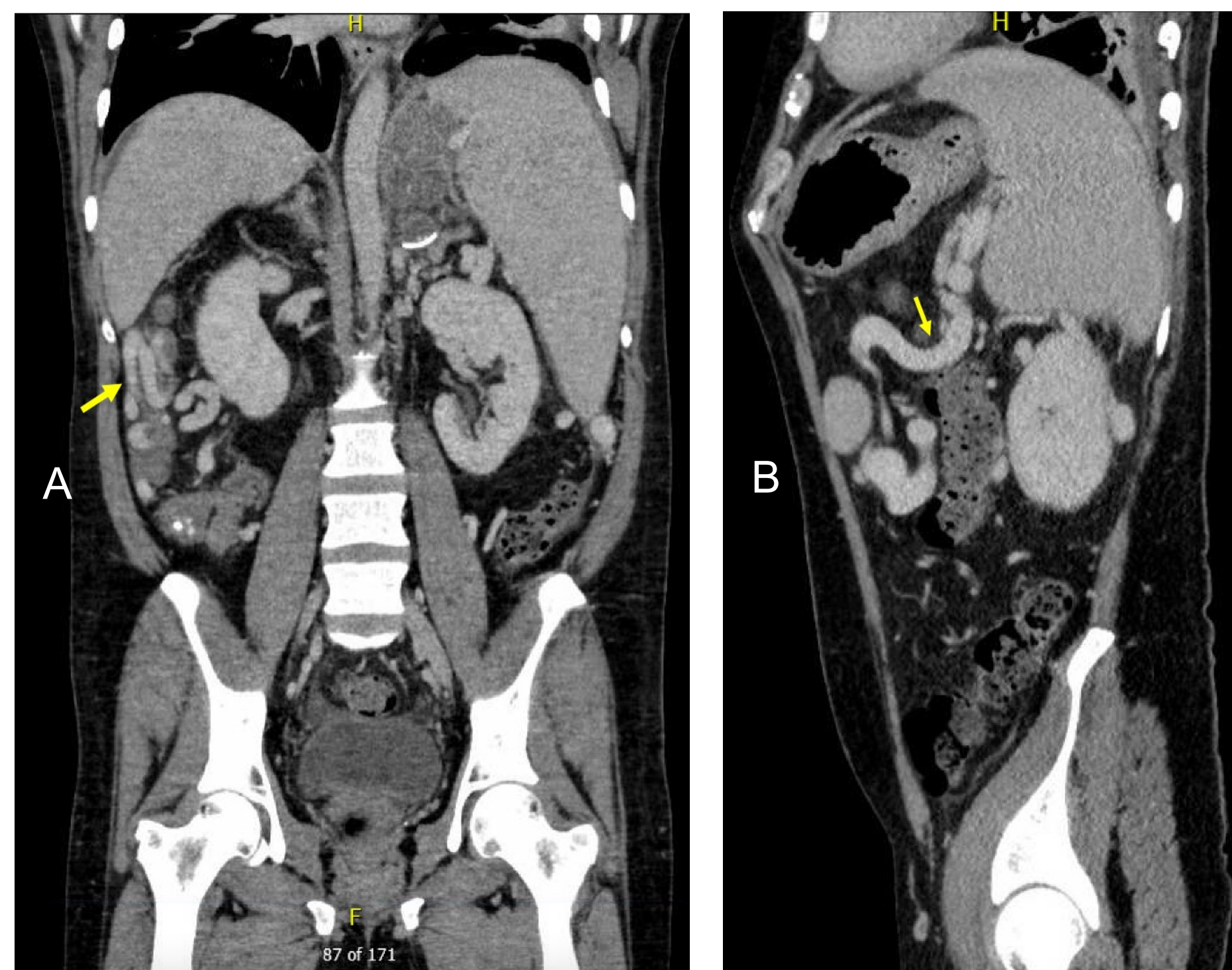


Hepatic Function Panel and International Normalized Ratio (INR)

Aspartate transaminase (AST)	50 U/L
Alanine transaminase (ALT)	20 U/L
Alkaline phosphatase	92 U/L
Total bilirubin	3.0 U/L
Albumin	2.5 g/dL
INR	2.0

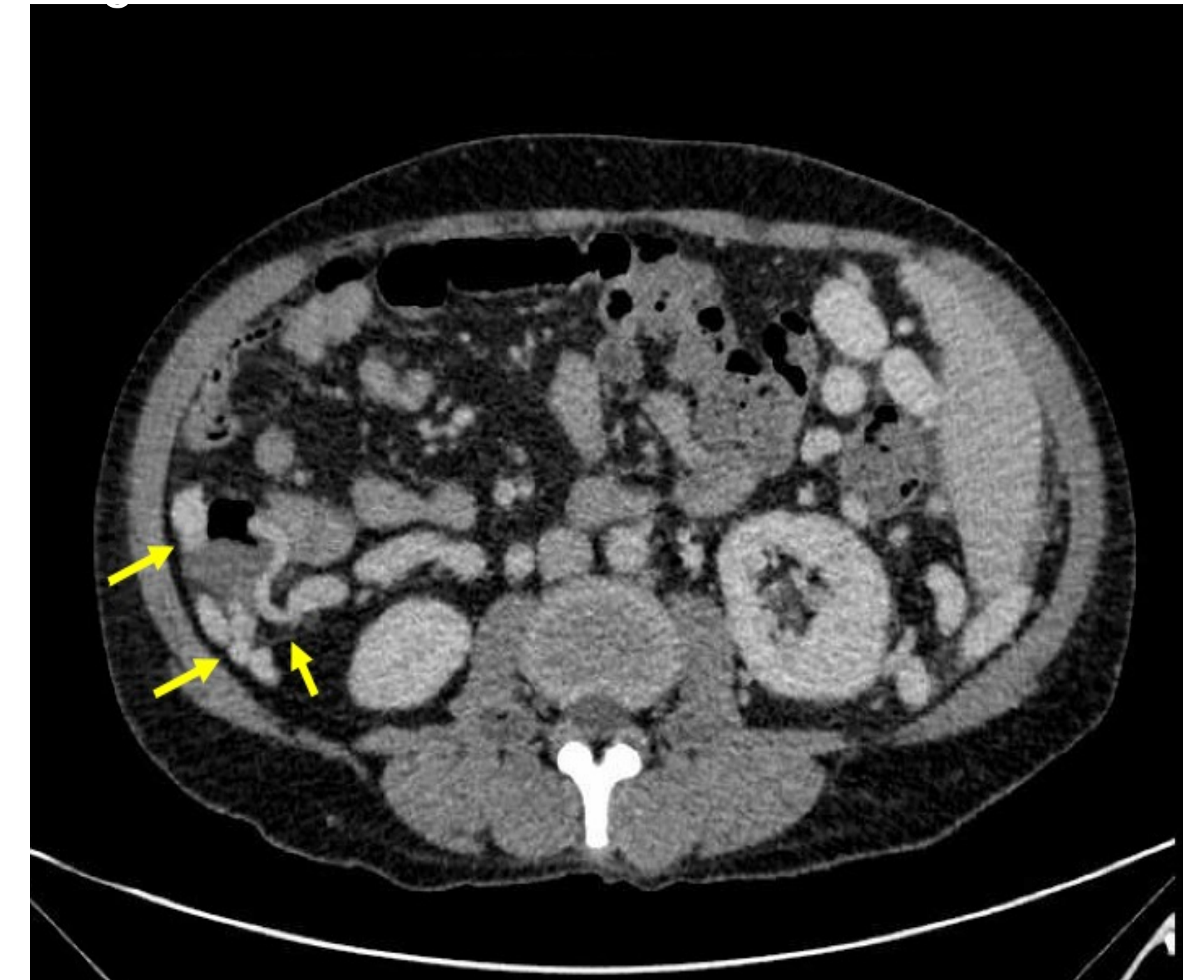
- The patient was treated with octreotide infusion and antibiotics for spontaneous bacteria peritonitis prophylaxis.
- A CT three phase abdominal imaging revealed significant peri-splenic and ascending colon varices with smaller varices supplying the descending colon.
- The case was reviewed with interventional radiology and hepatology and the patient underwent transjugular intrahepatic portosystemic shunt (TIPS) placement with coil and plug embolization of the splenic varix and gonadal varix feeding into the ascending colon varix.
- The patient did not have any further episodes of hematochezia and his hemoglobin stabilized.
- A few days later, the patient underwent an orthotic liver transplant. His post-operative course was uncomplicated.

IMAGING



A. Coronal image of colonic varix.

B. Sagittal image of colonic varix.



C. Transverse image of colonic varix.

DISCUSSION

- This is a rare case of a colonic varix resulting in a clinically significant LGIB. There is no standardization of therapy for ectopic varices due to the heterogeneity in vascular anatomy.
- Therapeutic options include endoscopic variceal band ligation, cyanoacrylate injections, surgery, TIPS, and coil embolization.
- This case highlights the importance of a multi-disciplinary approach with gastroenterologists, hepatologists, interventional radiologists and surgeons for the treatment of colonic varices.