Ischemic colitis and its association with estrogen-containing oral contraceptive pills

Authors: Kais Antonios MD, Elliot Bernestein MD, James Haubert MD, Anupam Suneja MD

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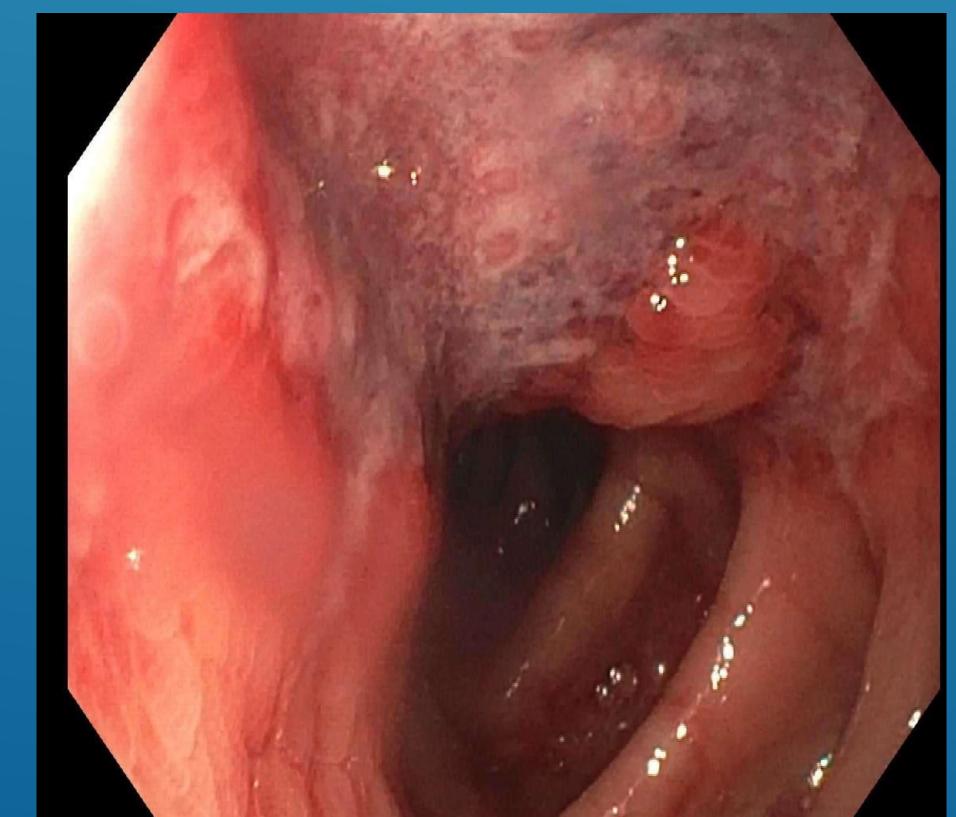
INTRODUCTION

- Ischemic colitis (IC) is an uncommon condition with the incidence ranging from 4.4 to 44 per 100,000 person-years
- Due to a lack of specific symptoms for IC, and the risk of progression to necrotic bowel without early recognition, a high index of suspicion is needed to identify IC in those below 50 years of age
- A single institution study determined that half of the female patients with IC onset at less than 50 years of age were using oral contraceptives.

CASE REPORT

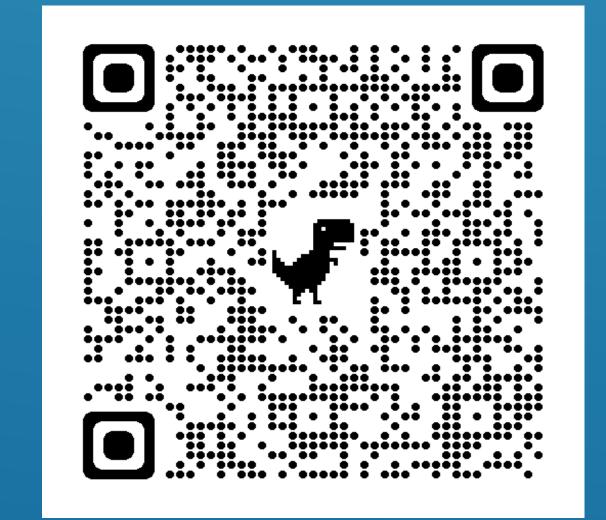
- A 45-year-old woman with a history of GERD, avascular necrosis of bilateral femoral heads, and long-term OCP use presented with a one-day history of abdominal pain and hematochezia
- (CT) of the abdomen and pelvis showed a patent abdominal aortic artery, SMA, and IMA, in addition to diffuse thickening of the left colon
- Flexible sigmoidoscopy showed patchy, discontinuous areas in the descending colon and at the splenic flexure
- Biopsy results from the mentioned area confirmed the diagnosis of ischemic colitis

IMAGING



Flexible sigmoidoscopy: Discontinuous area of severely erythematous mucosa in the descending colon

FOR ISCHEMIC COLITIS, THINK OF ESTROGEN-CONTAINING OCPS AS A CONTRIBUTING FACTOR



DISCUSSION

- This case highlights that ischemic colitis should be considered in the differential diagnosis of abdominal pain and hematochezia in premenopausal women, especially those taking oral contraceptive
- Ischemic colitis can be caused by arterial or venous thrombosis, and the role of OC in venous thrombosis is well-established
- OCs affect plasma levels of procoagulant factors (VII, VIII, and IX), fibrinogen, prothrombin, anticoagulant and fibrinolytic pathway proteins
- In addition, OCs cause acquired activated protein C (APC) resistance and decreased protein S.
- An episode of IC should lead to a revaluation of any future estrogen use.
- Conflicting case control studies with risk varying 0.59-1.05

ADDITIONAL INFO

- Ischemic colitis can involve any part of the
- Colonoscopy and histology are golden standard for diagnosis. Consistent findings include petechial hemorrhages, edematous and fragile mucosa, mucosal bleeding, segmental erythema, scattered erosions, and longitudinal ulcerations
- Initial treatment is supportive (Intravenous) fluids and bowel rest). Surgical intervention should be considered in cases unresponsive to conservative treatment
- Physicians treating ischemic colitis in young women should consider the use of contraceptive medication containing estrogens or pregnancy as possible causes

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