

Successful Clinical Remission of Ulcerative Colitis Flare with Oral Vancomycin in a Patient with Primary Sclerosing Cholangitis and Disseminated Coccidiomycosis

Paul Gomez MD¹, Brian M. Fung MD¹, Rebecca McCollaum NP², Joseph David MD^{1,2}

1. University of Arizona College of Medicine-Phoenix 2. Arizona Digestive Health (GI Alliance)

Introduction

- Ulcerative colitis with primary sclerosing cholangitis (UC-PSC) is thought to be a distinct entity that is associated with earlier age of onset and pancolitis.
- Current therapeutic approaches to patients with UC-PSC are similar to those with UC alone. Oral vancomycin has been shown to have therapeutic effects on colitis in patients with UC-PSC. We present a complicated case of UC-PSC that was successfully treated with oral vancomycin.

Case Description

- 28-year-old African-American male with a 2-year history of UC-PSC was referred to our inpatient service for severe UC (Partial Mayo Index Score 9) as well as night sweats, weight loss, and severe peripheral polyarthrititis.
- He had previously failed adalimumab, azathioprine, and infliximab-dyyb.

Case Description

- At the time of presentation, he had been on vedolizumab for 7 months, as well as amphotericin B and fluconazole for disseminated coccidiomycosis involving his lungs, skin, eyes and other organs. Stool pathogen panel was negative, and flexible sigmoidoscopy demonstrated Mayo endoscopic score of 2 (Photos 1 & 2).
- He had severe arthritis in both knees, along with less severe arthritis in other peripheral joints, and was unable to ambulate because of this. Synovial fluid aspirate of the knee was suggestive of inflammatory arthritis, though his coccidioides antigen was positive.
- Given the desire to avoid further immunosuppression with IV steroids, he was started on oral vancomycin 500 mg twice daily. Within 24 hours, he began to note improvement in all symptoms and within 7 days, his partial Mayo score was 0, and he was ambulating with minimal pain.
- Nine months later, he had regained 15 pounds and remained in clinical remission of his colitis on oral vancomycin and vedolizumab, as well as antifungals and ursodiol. His alkaline phosphatase remained elevated and his MRCP continued to show intrahepatic PSC.

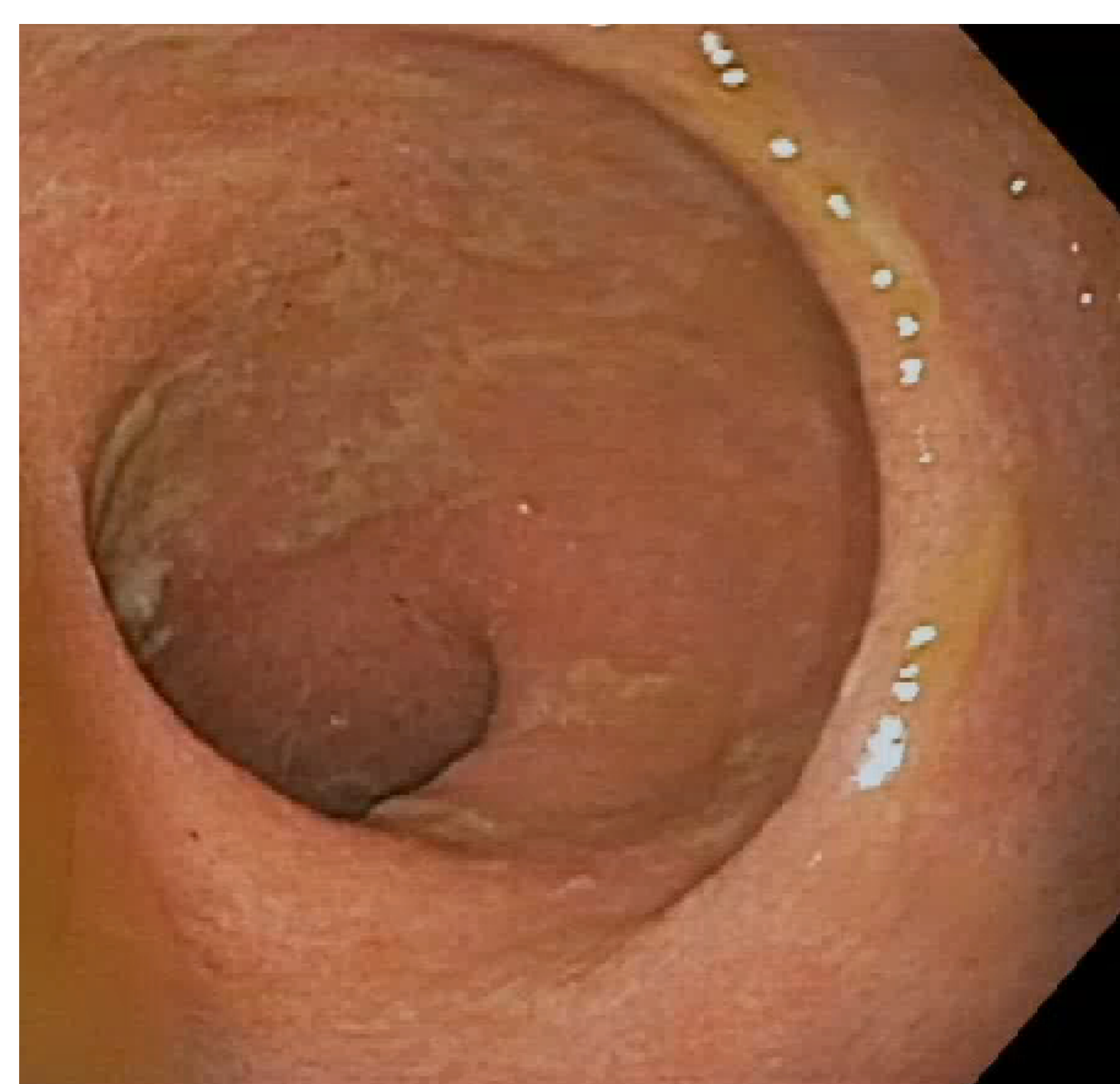


Photo 1.



Photo 2.

Photos 1 & 2 from flexible sigmoidoscopy show Mayo endoscopic score 2 (marked erythema, absent vascular pattern, friability, erosions). Full Mayo Index Score was 11.

- Follow up colonoscopy was completed nine months after initial presentation and his Full Mayo Index Score was 0. Photos 3 & 4 from colonoscopy show Mayo endoscopic score of 0.



Photo 3.



Photo 4.

Discussion

- Numerous case reports have described the benefit of oral vancomycin in patients with UC-PSC in both adult and pediatric patients.
- This case adds to that body of evidence and highlights the need for safe, effective agents for inflammatory bowel disease that can be used in patients without concern of activating or exacerbating infections such as tuberculosis, hepatitis B, or in the case of our patient, disseminated coccidiomycosis.

References

- By Request: pagomez@arizona.edu