

Diagnosis and treatment: Amebic colitis (AC) vs Ulcerative colitis (UC)

Overlap & Clinical Approach

Diagnosis

- Awareness of AC even in non-endemic areas

For etiology:

- Stool microscopy, PCR, serology
- Colonoscopy with biopsy



Limitations:

- Low sensitivity of stool tests
- Endoscopy not always definitive

UC
(Ulcerative
Colitis)

★ *Diagnostic dilemmas:* ?

1. Acute colitis: 1st presentation of UC or AC?
2. IBD Flare: *E. histolytica* etiological agent or innocent bystander

★ *Therapeutic Dilemmas:* R_x
1st UC or AC?

AC
(Amoebic
Colitis)

Treatment

If disease flare (AC+UC)

Treatment of AC and UC

1. Anti –amoebic therapy (2- step: tissue and luminal amoebicidal agent)
2. Supportive care: Hydration, Nutrition
3. Strict monitoring of symptoms

↓ *If no improvement*

Prompt escalation of immunosuppressive therapy of UC (*After ruling out/treating AC*)

Management strategy

Rule out AC

Treat AC first

Monitor Response

No response

Escalate UC therapy (if needed)



Key Message: Always consider and treat AC in patients from endemic areas with colitis before starting or escalating immunosuppressive therapy for UC