



# NSAID-Induced Colopathy

Amrit K. Kamboj, MD; Roger K. Moreira, MD; and Seth Sweetser, MD



From the Division of Gastroenterology and Hepatology (A.K.K., S.S.) and the Department of Pathology (R.K.M.), Mayo Clinic, Rochester, MN



Scan code to view supplementary figures

A 71-year-old man was hospitalized with a 2-year history of worsening diarrhea, abdominal pain, and 30-pound weight loss. He had chronic osteoarthritis for which he took diclofenac sodium daily for over 10 years for symptomatic relief. Esophago-gastroduodenoscopy showed ulcerative gastroduodenal disease. Colonoscopy revealed large, extensive, punched out, geographic ulcerations throughout the rectum and sigmoid colon (Figure 1) and given their severity, the procedure was shortened to minimize potential complications. Histology of colonic mucosal biopsies demonstrated non-specific ulceration without lymphocytic infiltrate or crypt distortion (Supplementary Figures 1 and 2, available online at <http://www.mayoclinicproceedings.org>). A cytomegalovirus immunostain was negative. Nonsteroidal anti-inflammatory drug (NSAID) colopathy was suspected and the patient was instructed to discontinue NSAIDs. At follow-up one year later, he denied NSAID use and repeat esophago-gastroduodenoscopy and colonoscopy (Figure 2) were normal. Nonsteroidal anti-inflammatory drugs are commonly



**FIGURE 2.** Colonoscopy one-year after NSAID discontinuation was normal.

taken for musculo-skeletal conditions. While the gastroduodenal ulcerative effects of NSAIDs are well known, colopathy characterized by ulceration is also a potential complication.<sup>1,2</sup> This entity can potentially be confused with inflammatory bowel disease or infectious colitides. Discontinuation of NSAIDs alone is effective in resolving the colopathy.

## SUPPLEMENTAL ONLINE MATERIAL

Supplemental material can be found online at: <http://www.mayoclinicproceedings.org>. Supplemental material attached to journal articles has not been edited, and the authors take responsibility for the accuracy of all data.

**Potential Competing Interests:** The authors report no competing interests.

**Correspondence:** Address to Seth Sweetser, MD, Division of Gastroenterology and Hepatology, Mayo Clinic, 200 First Street SW, Rochester, MN 55905 ([sweetser.seth@mayo.edu](mailto:sweetser.seth@mayo.edu)).

## ORCID

Amrit K. Kamboj: <https://orcid.org/0000-0002-8296-1029>; Seth Sweetser: <https://orcid.org/0000-0001-9251-0136>



**FIGURE 1.** Colonoscopy revealed large, extensive, punched out, geographic ulcerations throughout the rectum and sigmoid colon.

## REFERENCES

1. Bjamason I, Hayllar J, MacPherson AJ, Russell AS. Side effects of nonsteroidal anti-inflammatory drugs on the small and large intestine in humans. *Gastroenterology*. 1993;104(6):1832-1847.
2. Katsanos KH, Sigounas DE, Christodoulou DK, Tsianos EV. Nonsteroidal anti-inflammatory drug-induced acute ulcers in the colon. *Ann Gastroenterol*. 2011;24(4):320.