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GASTROENTEROLOGY BOARD REVIEW MANUAL

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Evaluation and Treatment of Diarrheal Conditions

Series Editor and Contributing Author:

Robert M. Craig, MD

Professor of Medicine

Chief, Gastroenterology Division

Department of Medicine

Northwestern University Medical School

Chicago, IL

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Cover Illustration by Christine Schaar

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I. INTRODUCTION

Diarrhea is one of the most important medical problems worldwide. Infectious diarrhea alone is the first or second leading killer in developing countries, affecting mostly infants and children. More than 8 million physician visits occur annually for diarrhea in the United States,¹ and diarrhea is responsible for more than 300 deaths each year in North America.² Noninfectious diarrheal conditions, including the inflammatory bowel diseases and irritable bowel syndrome, also are responsible for much lost productivity and considerable suffering among patients.

The understanding of the pathophysiology and anatomy of diarrheal disorders has advanced considerably in the past 10 years, and therapy for most of these disorders has consequently improved. The purpose of this manual is to present case patients who have various types of diarrhea and elucidate the pathophysiology and treatment of each disorder. Patients with giardiasis, microscopic colitis, *Clostridium difficile* diarrhea, cholera, and irritable bowel syndrome are discussed. Future directions for therapy are discussed as well.

II. CASE I

CASE I PRESENTATION

Patient 1 is a 40-year-old woman who has had diarrhea for the past year, with 4 to 8 passages of liquid stool daily. The volume of each passage is estimated to be in the range of one half to 1 cup. There is no hematochezia. Some abdominal cramping accompanies the diarrheal episodes, but there is no steady abdominal pain. She is a married homemaker with no past history of illicit drug use or extramarital sexual activity. She has no history of fever, weight loss, anorexia, or foreign travel. She drinks little milk and has not noted that cessation of milk-drinking improves her symptoms.

Her physical examination shows her to be comfortable and in no distress. Her vital signs are normal. She does not exhibit pallor or lymphadenopathy. Her abdomen is not tender or distended, and normal bowel sounds are heard. Baseline laboratory workup results disclose a normal complete blood count (CBC), serum chemistry profile, and urinalysis.