Symptomatic microscopic colitis

- Adverse reaction to budesonide
- Cost of budesonide
- Patient preference

2nd Line Medical Therapy
- Bismuth subsalicylate
- Prednisone (prednisolone)
- Mesalamine

Budesonide 9mg daily

Yes

Clinical response

No

Treat for 8 weeks

Budesonide ≤ 6mg daily x 6-12 months

No maintenance therapy

Work-up for co-existing causes for diarrhea

- Clinical recurrence after stopping budesonide

Yes

Co-existing condition

No

Treat co-existing conditions

- Avoid possible precipitating medications
- Consider alternative therapies including immunosuppressants

1Work-up should include, but not be limited to, evaluation for celiac disease, hyperthyroidism, irritable bowel syndrome.
2Maintenance dosing can be tapered to lowest effective dose, which may range from 3 mg every other day to 6 mg daily.
3Potential precipitating medications include, but are not limited to: NSAIDs, aspirin, PPI, SSRI, clozapine and acarbose.
4Though direct evidence is very limited, case series suggest that azathioprine and anti-TNF agents may be effective in refractory microscopic colitis.

Review at gastro.org/microcolitis.