

## Diarrhea (COLON-8)

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Chronic diarrhea is defined as diarrhea for greater than 28 days, whereas acute diarrhea is present <28 days duration. Both acute and chronic diarrhea have many etiologies including infection, inflammation, or malabsorption. Colonoscopy is indicated in the setting of chronic diarrhea once baseline work up to assess for inflammation, infection and celiac disease has been completed, and studies are inconclusive or suggestive of inflammatory bowel disease. Colonoscopy may be indicated in immunocompetent patients with acute diarrhea a baseline work up including labs, stool testing and sigmoidoscopy are negative or inconclusive, or there is concern for significant lower gastrointestinal bleeding. Immunocompromised individuals are at increased risk of gastrointestinal pathology. Colonoscopy should be performed (rather than sigmoidoscopy) to increase diagnostic yield in immunocompromised patients if stool studies do not reveal an etiology or if the symptoms do not respond to treatment.

### References

1. Black TP, Manolakis CS, Di Palma JA. "Red flag" evaluation yield in Irritable Bowel Syndrome. *J Gastrointest Liver Dis.* 2012;21(2):153-156.
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3. Smalley W, Falck-Ytter C, Carrasco-Labra A, Wani S, Lytvyn L, Falck-Ytter Y. AGA clinical practice guidelines on the laboratory evaluation of functional diarrhea and diarrhea-predominant Irritable Bowel Syndrome in adults (IBS-D). *Gastroenterology.* 2019;157(3):851-854. doi:10.1053/j.gastro.2019.07.004.