

## **Chronic diarrhea clinical case**

### **Learner's copy**

68 y/o patient with history of hypertension, asthma, depression, and gastric ulcers comes to the clinic because of diarrhea. She has been having diarrhea for about 6 months. Before the diarrhea started, she had an episode of GI bleed that was secondary to gastric ulcers caused by prolonged NSAID use. She was treated with omeprazole. She recently had a follow up EGD that showed resolution of the ulcers.

Vitals: RR 16, HR 72, BP 123/72, T 36.2, Weight 63.1 kg.

### **Case discussion**

What other questions regarding her symptoms would you like to ask?

What other details about her history do you want to know?

What would you like to know about her physical exam?

What are some of your differential diagnoses?

At this point, what other work up would you like to do?

Would you prescribe anything at this point to relieve her symptoms?

### **Chronic diarrhea workup and management**

How is chronic diarrhea defined?

How can chronic diarrhea be categorized according to stool characteristics?

What are some of the causes of chronic diarrhea within those categories?

What are the first steps in the evaluation of a patient with chronic diarrhea? What specific things do you want to ask about the patient's history? What do you want to look for in the physical exam? What lab tests would you initially get?

How can you distinguish between functional from organic causes of diarrhea?

What are some alarm features that would prompt you to refer patients for endoscopic evaluation?

What empiric treatments can be used for symptomatic management?