



**Clostridioides difficile Colitis

Pseudomembranous Colitis -

Clinical Presentation



Profuse, watery diarrheaUsually no blood or mucus



Recent antibiotic use

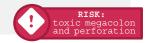
Clindamycin, ampicillin, cephalosporins Symptoms present 1-6 weeks following therapy



Leukocytosis



Crampy abdominal pain



Diagnosis & Workup



Toxins in stool

By PCR or antigen detection



Abdominal radiograph

Rule out toxic megacolon and perforation



Initial

Oral vancomycin
Oral fidaxomicin

Recurrent

Repeat prior regimen

Or switch to oral vancomycin/ long-term vancomycin taper Fecal microbiota transplant



Pathology

- A Toxin A (enterotoxin): binds to brush border of the gut and alters fluid secretion
- B Toxin B (cytotoxin):
 disrupts cytoskeleton via actin
 depolymerization

