

# MICROSCOPIC COLITIS: A COMPARATIVE STUDY OF CLINICAL SYMPTOMS AND HISTOPATHOLOGICAL FEATURES

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UEG Week Berlin 2025

Poster

IBD

October 4, 2025

**A 10-year retrospective study of 54 patients with microscopic colitis found that specific histopathological features—intraepithelial lymphocyte count and subepithelial collagen band thickness—strongly correlate with diarrhea severity and predict speed of clinical response to treatment.**

## KEY POINTS

- Intraepithelial lymphocyte count showed very strong positive correlation with frequency of diarrheal stools ( $r = 0.873$ ;  $p < 0.001$ ), and patients with IEL count below 30 percent achieved symptom resolution in a median of 2 weeks versus 4 weeks for those with 30 percent or higher ( $p < 0.001$ ).
- Subepithelial collagen band thickness below 20  $\mu\text{m}$  was associated with faster clinical improvement (median 2 weeks) compared to thickness of 20  $\mu\text{m}$  or greater (median 6 weeks;  $p < 0.002$ ).
- Among 54 patients (19 collagenous colitis, 35 lymphocytic colitis), 90.7 percent received budesonide and 9.3 percent loperamide; follow-up histology at 12 months showed complete mucosal normalization in all patients.
- The study supports that histopathological parameters can serve as prognostic markers for therapeutic response in microscopic colitis, a common and treatable cause of chronic diarrhea.

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