

European guidelines on microscopic colitis: UEG and European Microscopic Colitis Group (EMCG) statements and recommendations

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Podcast Episode

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The European Microscopic Colitis Group published new European guidelines on diagnosis and management of microscopic colitis, establishing evidence-based recommendations for biopsy protocols, histological criteria, and treatment algorithms centered on budesonide therapy.

KEY POINTS

- The guideline recommends taking at least two biopsies from the right colon and two from the descending colon for diagnosis, achieving close to 100% diagnostic yield and reducing unnecessary costs.
- Oral budesonide 9 mg daily is the only evidence-based and licensed first-line treatment, with meta-analysis showing 81% remission in collagenous colitis and 84% in lymphocytic colitis after 6-8 weeks.
- The guideline defines incomplete microscopic colitis for the first time: collagenous band of 5-10 micrometers with lamina propria inflammation, or 10-20 intraepithelial lymphocytes per 100 epithelial cells.
- Faecal calprotectin is not recommended for diagnosis or monitoring due to significant overlap between patients and controls, and the guideline recommends screening all patients for coeliac disease given ten-fold higher prevalence.
- Long-term management should use low-dose budesonide 0-6 mg daily with calcium and vitamin D supplementation, while refractory cases may require biologicals such as adalimumab or infliximab; mesalazine, bismuth, and methotrexate are not recommended.

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