

## **1. Introduction and Who Guideline applies to**

This guideline is intended for use by medical, nursing and pharmacy staff involved in the care of adult patients presenting with acute colitis.

*Entamoeba histolytica* is a protozoan parasite pathogenic to humans. It is endemic in South and Central America including the Caribbean, Africa and Asia (including Egypt and Turkey). Patients who have travelled or who are household/sexual contacts of a symptomatic traveler to these regions are at risk of acquisition. Transmission is by the faeco-oral route although sexual transmission has been documented. The incubation period may range from days to years. Although most cases of *E. histolytica* infection are asymptomatic, colitis and invasive extra-intestinal infection can occur. Amoebic colitis can present in a clinically similar manner to inflammatory bowel disease (IBD). It is important to consider and, if appropriate, investigate and treat for amoebic infection in patients with IBD-like symptoms and signs before or in addition to commencing immunosuppressive therapy for IBD as corticosteroids may worsen amoebic infection leading to fulminant colitis.

## **2. Guideline Standards and Procedures**

### Patient Selection

Patients in the following groups should be tested for *Entamoeba histolytica*:

1. All patients with new onset colitis as part of their initial investigation.
2. Patients with a flare up of pre-existing colitis\*.
3. Patients with colitis being considered for immunosuppressive therapy\* (including corticosteroids).

*\*Unless already tested previously and there has been no history of travel or contact with symptomatic travelers in the intervening period.*

### Investigations required for *E. histolytica* testing

Request and send the following samples immediately on admission

- Stool sample for *Entamoeba histolytica* PCR,
- Blood serum sample for *Entamoeba histolytica* serology.

These tests must be requested in addition to other microbiological investigations for colitis such as *C. difficile* toxin, stool cultures and microscopy for ova, cysts and parasites (if there is relevant travel history).

### Initiating Empirical Treatment

For patients being commenced on immunosuppressive therapy before the investigation results are available prescribe empirically:

- Metronidazole 800mg tds po for 10 days

If the patient is nil by mouth or there are concerns regarding absorption, IV metronidazole may be used. If neither the IV or enteral route are available, discuss with microbiology.

If metronidazole is contraindicated, discuss alternative treatment with microbiology.

## Responding to Investigation Results

Review treatment when stool PCR and serology results or other microbiology results are available. If either stool PCR or serology result are positive, please discuss with microbiology as a second antimicrobial agent will be indicated.

If both stool PCR and serology results are negative, stop treatment for *Entamoeba histolytica*.

### **3. Education and Training**

None

### **4. Monitoring Compliance**

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements

### **5. Supporting References (maximum of 3)**

1. Interim Public Health Guidelines for Amoebiasis. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/777437/Interim\\_Public\\_Health\\_Operational\\_Guidelines\\_for\\_Amoebiasis.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/777437/Interim_Public_Health_Operational_Guidelines_for_Amoebiasis.pdf)
2. Uptodate accessed 29/4/19. [https://www.uptodate.com/contents/intestinal-entamoeba-histolytica-amebiasis?search=amoebic%20colitis&sectionRank=2&usage\\_type=default&anchor=H5&source=machineLearning&selectedTitle=1~150&display\\_rank=1#H13](https://www.uptodate.com/contents/intestinal-entamoeba-histolytica-amebiasis?search=amoebic%20colitis&sectionRank=2&usage_type=default&anchor=H5&source=machineLearning&selectedTitle=1~150&display_rank=1#H13)
3. BNF. <https://bnf.nice.org.uk/drug/metronidazole.html#indicationsAndDoses>

### **6. Key Words**

Colitis, *Entamoeba histolytica*

CONTACT AND REVIEW DETAILS	
<b>Guideline Lead (Name and Title)</b> Dr Felicia Lim – Consultant Microbiologist	<b>Executive Lead</b> Dr Andrew Furlong – Medical Director
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