



# "Digest This"

A monthly newsletter from Dr. Carey Strom, MD, FASGE

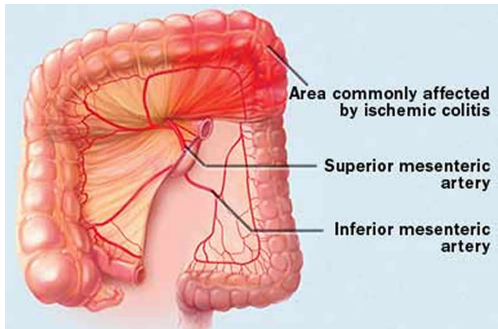
**October 3, 2022**

## **My Dear Patients:**

Ok, enough about Covid or Monkeypox, lets talk about another condition that is not rare - ischemic (low blood flow) colitis.

Our intestines have a lot of vessels, coming from multiple branches, delivering blood flow and nutrition to allow proper functioning. When blood flow is temporarily reduced, and not enough oxygen is being delivered, it can cause tissue damage to the affected area. Vessels can become constricted, or low pressure can cause a limited blood flow, and ischemic colitis can occur.

Any part of the colon can be affected, but most commonly it occurs on the left side of the abdomen. The main symptom is pain and is often misdiagnosed with other GI problems.



The specific cause of a decreased blood flow is not always clear. There are multiple factors that cause an increased risk for ischemic colitis:

- Atherosclerosis (build up of fat in vessels)
- Hypotension (dehydration, surgery, trauma, heart failure)
- Bowel obstruction (hernia, tumor, scar tissue)
- Surgery involving a lot of blood loss
- Vasculitis (inflammation of blood vessels)
- Cocaine use
- Colon cancer (rare)

It is most frequently seen in adults over the age of 60 and more common in women. Conditions that increase the risk of blood clots poses a risk. High cholesterol can cause a build up of fat in vessels diminishing blood flow. Scar tissue from previous surgeries can lead to reduced blood flow to the colon and heavy exercise can also reduce blood flow.

The main symptoms of ischemic colitis includes pain, cramping, and tenderness in the abdomen. It can come on gradually or suddenly. Stool can show bright red blood and sometimes blood can pass with no stool. There is often an urge to defecate with diarrhea and nausea. Low fevers, below 100 F, are common.

Ischemic colitis can be diagnosed solely on the symptoms, especially if the individual is over the age of 60. However, doctors do need to distinguish ischemic colitis from acute mesenteric ischemia, which is a more dangerous condition. Acute mesenteric ischemia is caused when a part of the intestine is completely and irreversibly blocked. A CT scan is typically performed to diagnose ischemic colitis.

Ischemic colitis can also occur on the right-side, even though it is less frequent. It is seen more often in individuals who have underlying medical problems such as hypertension, atrial fibrillation, and renal disease.

Typically, once diagnosed, ischemic colitis gets better on its own within a few days with proper hydration. However, in more severe causes, complications can arise such as tissue death, perforation, and bowel obstruction, all requiring surgery.

To prevent ischemic colitis it is recommended to eliminate any medication that poses a risk and making sure to stay well hydrated if you live in warm climates or exercise regularly.

Always seek immediate medical care if you have sudden and/or severe abdominal pain and bloody diarrhea.

For more information, or to know if you are up to date with your colonoscopy or endoscopy screenings, please do not hesitate to call us at our office at 310-550-0400 or email us at [info@doctorstrom.com](mailto:info@doctorstrom.com).

Many of you have had interest in our advocacy program and I have attached the letter below.

Warm regards,

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### **Our Advocacy Program**

Have you ever left the hospital or the doctor's office with more questions than when you entered?

If your doctor did not come to the hospital to visit you, how many different hospitalists did you see?

Have you ever tried to call your doctor after-hours and was not able to get a hold of them?

Have you ever talked to a physician assistant or nurse practitioner but would rather speak to the doctor?

Did you ever wish you had a kid who was a doctor?

Unfortunately, you are not alone. Being sick, injured, or recovering from surgery are all situations that makes a patient feel vulnerable. Many people find themselves frustrated and confused once they leave a health care facility. Unfortunately, electronic medical records lend to less verbal communication between patients and doctors thus issues may fall through the cracks. Many of us have tried to use patient portals for the electronic medical record but still do not know how to interpret their results which causes undo stress and anxiety. Many of you have asked me about patient advocacy programs.

I will relate a personal experience. When I was visiting my father several years ago in Florida, he was hospitalized for fainting. I was dressed in an unassuming way--in a T-shirt, blue jeans, and a baseball cap--and didn't identify myself as a doctor. I requested to speak to the doctor before my dad was discharged because there was no explanation for his symptom. The physician assistant told me that the doctor was very busy, and I can't speak to him. I told him I just needed about 30 seconds, yet I was still denied. The physician assistant then proceeded to say, "Ask me the question and I'll pass it on to the doctor."

So, I said "Really?"

He said "Sure, go right ahead."

I said, "My dad has sinus bradycardia with a rate of 34 with syncope and probably a vasovagal episode." The PA then proceeded to ask me if I was a doctor and I said, "Yes I am." Then, and only then, was I finally able to speak to his cardiologist. My dad had a pacemaker later that day. Just imagine if I wasn't there to be my father's advocate.

Patient advocacy is not something new to the healthcare industry; as a matter of fact, the complexity of the health care system has given rise to this new profession-  
-the patient advocate.

Several organizations provide training to those who want to be a patient advocate including the Professional Patient Advocate, the Alliance of Professional Health Advocates, and the National Association of Health Care Advocacy to name a few. UCLA extension classes also has a program that educates people about becoming patient advocates.

A healthcare advocate can be a spouse, relative, friend, caregiver, nurse or physician. Although all patients should have an advocate, unfortunately many do not.

What our patient advocacy program offers is a way for you to better understand your medical issues, by the advocate taking the time to communicate on your behalf with your healthcare providers regarding treatment, procedures and access your electronic health records (with your permission). So, we can refer to test results, notes, and medications to explain to you in simple and clear terms what's going on with your health which give you more of a voice and role in your medical care. Studies show this leads to less anxiety, less confusion, and better satisfaction. We have had many inquiries. If you are interested to hear about our patient advocacy program, please do not hesitate to contact us.

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