

## **Crohn disease: A male patient presenting with chronic diarrhea**

### **Abstract**

#### **Introduction**

Ulcerative colitis and Crohn disease are two diseases under the umbrella of inflammatory bowel disease. They present predominantly with gastrointestinal and array of extra-intestinal manifestations. Late diagnosis of this disease has impact on the prognosis of disease and the family.

#### **Case presentation**

A 16-year-old boy had relapsing and remitting, chronic diarrhea for two years. Increased stool frequency was associated with blood and mucous. This was associated generalized abdominal pain, low-grade fever and loss of weight. On examination, he was pale and poorly developed secondary sexual characteristics. His haematological investigations confirmed microcytic hypochromic anemia. The stool culture and retroviral screening were negative. Colonoscopy revealed ulcers and pseudo polyps in ascending colon with cobblestone appearance, distorted ileocaecal valve with distal ileal strictures. The histology was more in favor of Crohn disease. A diagnosis of Crohn disease with Montreal classification A1L3B2 was made. Oral prednisolone was used for remission induction and converted to azathioprine for the maintenance of remission. His symptoms resolved and growth and the secondary sexual characteristics slowly improved.

#### **Conclusion**

This case highlights the delay in the diagnosis of a patient with chronic diarrhea which should be considered in the differential diagnosis.

**Key words:** chronic diarrhea, Crohn disease, inflammatory bowel disease