Preface

Miscellaneous Colitides: What the Surgeon Needs to Know

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Considered a “grab bag” or a “potpourri” of topics without a natural home in the major pillars of colorectal disease (benign, malignant, anorectal, and pelvic floor), this issue on miscellaneous colitides attempts to put a surgeon’s perspective on topics more commonly encountered by medical subspecialists.

Having recently completed my journey to become a board-certified colorectal surgeon, I appreciate that the contributors of this issue have included summary tables of high-yield facts and comparisons of disease. Visual recognition of disease processes is critical to our ability to quickly recall and whittle down differential diagnoses, not just for board certifying examinations, but also for the day-to-day challenges of clinical practice. What makes this collection truly unique is its inclusion of numerous photographs which we have also shared with the American Society of Colon and Rectal Surgeons Online Learning Center.

As a reader, you will appreciate the thoroughness with which Drs. Sidani and Grodsky describe medical therapies for radiation proctopathy. From antioxidants to irrigants, from antibiotics to prostaglandins, their review touches on much more than what we currently know about treatments with formalin and hyperbarics. They delve into advanced endoscopic delivery of energies, such as argon, agents for cryotherapy, and radiofrequency. Drs. Sigle and Kim provide a comprehensive compilation of information specific to sexually transmitted infections of the rectum causing symptoms of proctitis. This is a disease grouping distinctly different from sexually transmitted infections of the anus. Drs. Stahl and Cole provide the reader with an easy reference guide of specific doses of medications used to treat persistent or recurrent *C. difficile* colitis. They also discuss Neal et al’s 2011 “Pitt Protocol” of warmed colonic antibi-

otic lavage through cannulation of the cecum via a laparoscopic ileostomy. The work by Drs. FitzGerald and Hernandez includes a dialogue about ischemic colitis which may present among endurance athletes or illicit drug users, patient subsets not uncommon to our clinical realm. In the article on acute colonic pseudoobstruction, Dr. Chudzinski provides an evidence-based algorithm for management of this condition, while Dr. Ayscue provides step-by-step instruction on advanced endoscopic techniques that could be utilized by the colorectal surgeon who encounters such patients. Dr. Chin, in her review of Behcet disease, offers a side-by-side comparison table to more commonly encountered inflammatory bowel diseases. Drs. Villaneuva and Alimi touch on another less-common disease—microscopic and eosinophilic colitis—and offer some simple background for the surgeon on celiac disease, which is often mistaken for colitis.

Drawing from my contacts within the Chesapeake Colorectal Society, I invited contributors from the Metropolitan Washington, D.C. area. They balanced academic demands with clinical load and personal priorities to make this collection possible. I am so proud of the community that was built around this issue as a result of intense collaboration among coauthors and senior mentors, as well as radiologists, pathologists, and endoscopists who provided images from multiple institutions (MedStar Washington Hospital Center, Georgetown University, Virginia Hospital Center, Children’s National Medical Center, Inova Fairfax, The Joint Pathology Center in Silver Spring, Maryland, and Radiation Oncology Treatment Group). We also thank Dr. Lee E. Smith who mentored several novice authors.

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Washington Hospital Center, Dr. Thomas J. Stahl, who requested that the Editor-in-Chief, Dr. David Beck, consider us for an issue. For many of our authors, this work is their first foray as a contributor to publish medical literature. Similarly, it

is my first attempt at editing and assembling a work of this volume. So, I personally extend my gratitude to Dr. Beck for the tremendous honor he afforded me and my respected colleagues in the Washington, D.C. colorectal surgical community.