

## Chronic Diarrhoea: When the Solution is Just Around the Corner!

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**Background:** Chronic diarrhea is a term that refers to stools that are loose or watery and occur three or more times per day for 4 or more weeks. This disease has high prevalence (approximately 5%) and presents a challenging differential diagnosis.

**Case History:** A 84-years-old woman, who was taking Olmesartan for blood hypertension, was admitted to the hospital for chronic diarrhea, complicated by severe malabsorption. Despite undergoing a complex laboratory and instrumental evaluation, the etiology of the diarrhea, resolved during her hospitalization, got unknown. The etiology was determined approximately a month later, when she was hospitalized again because of severe dehydration due to a recurrence of profuse diarrhea with acute renal failure, complicated

by severe metabolic acidosis. In fact, the patient had restarted taking Olmesartan, which had been suspended during her previous hospitalization, and here is the cause of diarrhea finally revealed! Eureka!

**Discussion:** Angiotensin receptor blocker (ARB)-induced intestinal disease was first reported in 2012. The pathophysiology of that disease is unknown. Cell-mediated immune dysfunction could potentially cause delayed symptom onset after starting ARB therapy. Although Olmesartan is the most frequently mentioned, other ARBs may also be responsible for that disease. Complete resolution is achieved after discontinuation of the drug.

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