Probiotics in the management of GI disorders

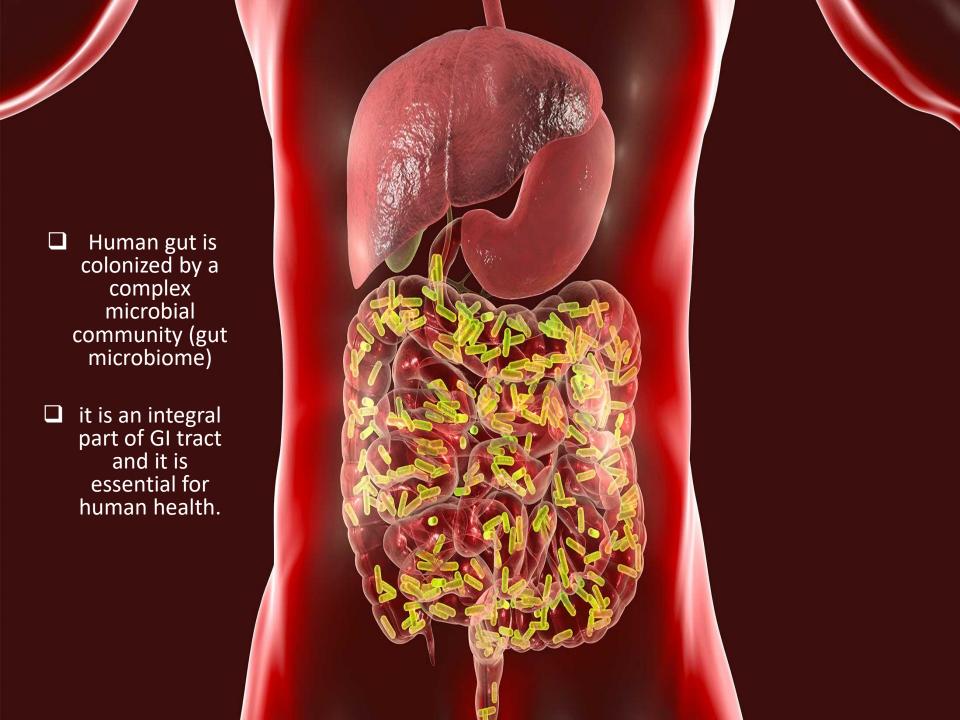
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AGA (American Gastroenterology Association)
World Gastroenterology Organisation
Practice Guideline
Uptodate

- The intestinal tract with vast ecology of microbes
- Necessary for health
- Potential to contribute to the development of diseases



- Administration of antibiotics
- Therapeutic diets and prebiotics
- Probiotics
- Combination of methods (synbiotics)
- Fecal microbial transplant (FMT)

Probiotics

- Live microorganisms
- In adequate amounts: health benefit on the host

Prebiotics

- selectively fermented ingredient
- specific changes in the composition of the gastrointestinal microbiota
- specific changes in the activity of the gastrointestinal microbiota
- conferring benefit(s) upon host health

Synbiotics

- both probiotics and prebiotics
- with conferred health benefits

Within the last 20 years, there has been increasing recognition and interest in the role of the gut microbiome in gastrointestinal health.

probiotics

- IBD(particularly pouchitis)
- Antibiotic-related diarrhea
- Infectious diarrhea
- Hepatic encephalopathy
- Irritable bowel syndrome
- Allergy

Mechanisms for the benefit

- Incompletely understood
- Suppression of growth /invasion
- Improvement of intestinal barrier function
- Modulation of the immune system
 - induce protective cytokines
 - -suppress proinflammatory cytokines
- Modulation of pain perception
 - -micro-opioid and cannabinoid receptors
 - analgesic functions (similar to morphine)
- Generating of short-chain fatty acids

Probiotics differ

- ability to resist gastric acid and bile acids
- colonization in the intestinal tract
- influence cytokines
- Not all probiotics are alike.
- benefits observed clinically with one species are not necessarily generalizable to another.

Pouchitis

- surgical treatment of U.C and FAP
- ileal pouch-anal anastomosis (IPAA)
- Pouchitis: the most common complication
- increased stool frequency, urgency, hematochezia, abdominal pain, fever
- preventing an initial attack
- preventing further relapse
- maintenance therapy

Ulcerative colitis

- Convincing data to support the use of probiotic preparations are lacking.
- AGA recommendation: only in the context of a clinical trial



IBD



- ☐ VSL#3 maybe effective in inducing remission in active UC.
- ☐ Probiotics maybe as effective as 5-ASA in preventing relapses of quiescent UC.

- □ Aliment pharmacol Ther. 2017(46)
- SR-MA



Crohn's disease

- Clinical trials: mixed results
- AGA recommendation: only in the context of a clinical trial
- studies of probiotics for induction or maintenance of remission : small sample sizes

Other Diarrheal Illness

- Infectious diarrhea
- C. difficile infection
- IBS
- Celiac disease

Infectious diarrhea

- In children with acute infectious gastroenteritis, suggest against the use of probiotics.
- in children with presumed acute infectious diarrheal illness has no benefit.

C. difficile infection

- No recommendations
- WGO Practice Guideline:

in the prevention of antibiotic-associated diarrhea, there is strong evidence of efficacy in adults or children who are receiving antibiotic therapy



Antibiotic-associated diarrhea

Lactobacilli strains especially *L.casei* have a good effect on the prevention of *Clostridium dificile* associated diarrhea and antibioticassociated diarrhea.

- J. Dig Dis 2020(21)
- ☐ SR-MA

IBS

 In symptomatic children and adults, we recommend the use of probiotics <u>only in the</u> context of a clinical trial.



IBS



☐ Treatment with a multi-strain probiotics for 8 weeks led to significant increases in beneficial in the gut as well as the improvement of gastrointestinal symptoms in diarrhea predominant IBS.

☐ Gastroenterology research and practice 2018(8)

Celiac disease

<u>Lactobacillus and Bifidobacterium</u>
 <u>concentrations are decreased in celiac disease</u>

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- Probiotics can degrade or alter gluten and gliadin
- Mixed results
- <u>Suggestion</u>: lack of activation of mucosal cytokine responses following consumption of bread

Constipation

- Evidence to support the use of probiotics in children or adults are lacking.
- Suggestion of improvement in defecation frequency, stool consistency, and intestinal transit time
- marked heterogeneity in study design and results



Constipation in children



☐ While some probiotic strains showed some effects on defecation frequency none of the probiotics had beneficial effects on frequency of fecal incontinence or frequency of abdominal pain .

- ☐ Eur. J Pediatr 2017(1
- ☐ SR



Lactose Intolerance

- Lactase-containing probiotics
- Lactose fermenting Lactobacillus acidophilus

strain: reduced symptoms

Other Disoders

- Helicobacter pylori eradication
 - -reducing side effects
 - no evidence to use alone
- GERD
- SBBO
- Colic
- Chronic abdominal pain

Other Disoders

- Allergy
 - -reduce intestinal permeability
 - -reduce generation of proinflammatory cytokines
- Nonalcoholic fatty liver disease
- Hepatic encephalopathy
- NEC

