

A MICROBIOME TESTING-BASED PRECISION MEDICINE APPROACH TO TREAT POST-INFECTIOUS IRRITABLE BOWEL SYNDROME: A PILOT STUDY

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A pilot study of 13 patients with post-infectious IBS found that personalized therapy based on gut microbiome testing led to symptom improvement in 93% of patients at 12 weeks, with 38% achieving complete remission.

KEY POINTS

- Thirteen patients with post-infectious IBS diagnosed by Rome IV criteria underwent 16S rRNA-based stool microbiome testing and received individualized treatment with non-absorbable antibiotics, prebiotics, and probiotics targeting specific microbiome abnormalities.
- At baseline, common microbiome alterations included low abundance of Bifidobacteria in 69% of patients, low short-chain fatty acid producers in 54%, and low Akkermansia in 62%.
- Treatment consisted of rifaximin in 69% and paromomycin in 31% of patients, followed by various probiotic strains and prebiotics including Lactobacillus-based probiotics in 54%, Bifidobacterium-based probiotics in 38%, and inulin or psyllium in 69%.
- At 12-week follow-up, 12 of 13 patients (93%) experienced symptom improvement and 5 patients (38%) achieved total symptom remission.
- The authors conclude that this precision medicine approach may be promising for treating post-infectious IBS but acknowledge that larger randomized controlled trials are needed to confirm these preliminary findings.

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