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Summary

INTESTINAL PERMEABILITY IN IRRITABLE BOWEL SYNDROME: RESULTS FROM THE MULTICENTRIC EUROPEAN STUDY DISCOVERIE

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Colorectal

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A multicentric European study of 368 IBS patients found that psychiatric and somatic comorbidities do not alter small intestinal or colonic permeability, but significant geographic variability exists between countries.

KEY POINTS

- In vivo and ex vivo measures of intestinal permeability showed no significant differences between IBS patients with or without psychiatric/somatic comorbidities compared to healthy controls across multiple permeability markers (L/M ratio, percentage S excreted, S/M ratio, and paracellular permeability to FITC-dextran).
- Significant differences in all permeability measures ($p<0.0001$) were observed between IBS patients recruited from different European hospitals, suggesting geographic or population-level factors may influence intestinal barrier function.
- The study included 368 IBS patients (197 with comorbidities, 171 without) and 23 healthy volunteers from six European hospitals, using Rome IV criteria for IBS diagnosis.
- This research is relevant for gastroenterologists and researchers investigating IBS pathophysiology and the role of intestinal barrier dysfunction in patients with and without psychiatric or somatic comorbidities.

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