SCREENING OF DONOR FECES WITH A DIRECT STOOL TESTING-BASED APPROACH: FRAMEWORK AND OUTCOMES OF A LARGE-VOLUME DONOR STOOL BIOBANK FOR FECAL MICROBIOTA TRANSPLANTATION

Debora Rondinella

UEG Week Copenhagen 2023 | Poster

Colorectal

October 17, 2023

A four-year prospective study of donor screening for fecal microbiota transplantation using direct stool testing with rapid molecular assay showed no serious adverse events but required exclusion of 37.6% of donations due to intestinal pathogen detection.

KEY POINTS

- From 2019 to 2022, 227 donor candidates were screened using a five-step protocol including rapid molecular testing for gut pathogens, with 69 donors (30% of candidates) ultimately enrolled and 231 donations collected.
- Of 231 fecal donations, 136 (58.8%) were stored for FMT use, while 87 (37.6%) were excluded for intestinal pathogen positivity, most commonly Enteropathogenic E. coli (13.4%), ESBL E. coli (6.5%), and Blastocystis hominis (7.3%).
- Pathogen detection showed seasonal variation with 55.8% of positive samples occurring in autumn months (September to December).
- No serious adverse events or infections were observed at 12 weeks after FMT in recipients who received the screened donations.
- The authors conclude that direct stool testing ensures high FMT safety but note that high donor exclusion rates require robust donor recruitment frameworks to maintain adequate fecal aliquot availability.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/c6932698-743c-11ee-b09f-0242ac140004

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.