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Summary

DOUBLE-EDGED SWORD EFFECT OF GLUCOCORTICOIDS IN EXPERIMENTAL COLITIS – IS THERE A ROLE OF RAPAMYCIN?

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In a murine DSS colitis model, oral prednisolone ameliorated inflammation but increased intestinal permeability, hemorrhage, and disease activity index compared to parenteral administration, while co-administration with rapamycin reduced these detrimental effects.

KEY POINTS

- Prednisolone (200 µg/day) reduced inflammatory markers (S100a8, S100a9, Cxcl1, Il6) and colon thickening in DSS-induced colitis in C57BL/6J mice.
- Oral but not intraperitoneal prednisolone increased 4 kDa FITC-dextran permeability, plasma lipopolysaccharide levels, colonic hemorrhage, and disease activity index.
- Co-administration of rapamycin (60 µg/day) with oral prednisolone reduced disease activity index and decreased bacterial adherence to colonic mucosa compared to prednisolone alone.
- Budesonide (6 µg/day) largely reproduced prednisolone findings and additionally increased body weight loss.
- This experimental study may inform strategies to optimize glucocorticoid therapy in inflammatory bowel disease by addressing route-dependent barrier effects.

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