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Summary

SUSTAINED LONG-TERM EFFECT OF SPECIALISED GASTROENTEROLOGICAL TREATMENT FOR BOWEL DYSFUNCTION AFTER PELVIC AND COLON CANCER TREATMENT: A PROSPECTIVE COHORT STUDY

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Structured assessment and targeted treatment in Danish late-sequelae clinics for cancer survivors with diarrhoea-predominant symptoms was associated with sustained improvements in bowel function and quality of life three years after discharge.

KEY POINTS

- Among 339 cancer survivors with diarrhoea-predominant symptoms, self-rated bowel function improved in 59% at discharge, 51% at 12 months, and 59% at 36 months.
- Bile acid malabsorption was identified in 66.9% of tested patients and small intestinal bacterial overgrowth in 62.6%.
- Bowel symptoms, perceived bowel function, and quality of life all improved during follow-up with p values less than 0.001.
- Treatment was directed by findings and included antibiotics for SIBO, bile acid sequestrants or dietary modification for bile acid malabsorption, and symptom-oriented pharmacological or dietary interventions.
- Similar patterns of improvement were observed across different outcomes and cancer types.

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