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Summary

FRUCTANS BOOST COLONIC FERMENTATION BUT DO NOT AGGRAVATE SYMPTOMS IN NON-CONSTIPATED IBS PATIENTS ON A LOW FODMAP DIET – A RANDOMIZED CONTROLLED TRIAL

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In non-constipated IBS patients on a low FODMAP diet, 18 g daily fructans increased colonic fermentation without worsening symptoms, while symptom increases during the intervention period occurred regardless of fructans or placebo, highlighting nocebo effects.

KEY POINTS

- This randomized, placebo-controlled trial (NCT04830410) enrolled 89 non-constipated IBS patients (Rome IV, 83% female, age 18–50 years) who followed a low FODMAP diet for three weeks, then were challenged with either fructans (18 g or 6 g daily) or maltodextrin placebo during week 3.
- The low FODMAP diet reduced overall IBS symptom severity at week 2 compared to habitual diet (IBS-SSS mean change -89 ± 94, P<0.0001) and reduced frequency of loose stools (mean change 10% ± 19%, P<0.0001).
- At week 3, no significant differences in symptoms or transit times were observed between fructans and sham for either the 18 g or 6 g dose.
- Supplementation with 18 g fructans increased breath hydrogen (3399 ± 2432 vs 1503 ± 434 ppm, P<0.01) and methane (1033 ± 698 vs 529 ± 511 ppm, P<0.01), and luminal colonic hydrogen (6.93 ± 3.88% vs 3.10 ± 2.33%, P=0.03) compared to sham, while 6 g fructans showed no differences in colonic fermentation.
- In the 6 g population, IBS symptom severity increased during the intervention period independent of fructans or sham (β-coefficient 37, 95% CI 5-70, p=0.03), demonstrating the contribution of negative expectations and nocebo effects.

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