## Clinical Education www.nleducation.co.uk

## **Route to Resolution**

## **SIBO Aetiology** Small Intestine Bowel Overgrowth Achlorhydria Small intestinal bacterial overgrowth (SIBO) refers to a condition in which Hypochlohydria abnormally large numbers of bacteria (at least 100,000 bacteria per ml of fluid) PPIs are present in the small intestine and the types of bacteria in the small intestine Stasis: dysmotility resemble more the bacteria of the colon than the small intestine. **Differential Diagnosis** Malnutrition Collagen vascular disease **IBS** Immune deficiency Symtoms & Signs Non-responding coeliac Surgery (loops, Fructose/Lactose malvagotomy, Bloating, abdominal discomfort, diarrhoea, abdominal pain, belching, flatulence, anaemia, B12 absorption bariatric) deficiency, mal-nutrition, reduced bile acids, steatorrhoea, weight loss, food allergies, brain Advancing Age fog, systemic inflammation, autonomic dysfunction, chronic fatigue, restless leg syndrome, **Chronic Pancreatitis** features associated with micronutrient deficiencies (vitamins B12, A, D and E, iron, thiamine, Chronic ABX use nicotinamide) IgA Deficiency Testing Coeliac Disease Crohn's Disease **Dietary Measures** Breath Test for Hydrogen **Short Bowel Syndrome** (H2) and Methane (CH4) NASH Low FODMAPs Diet (an indirect test) Cirrhosis 20 ppm is the threshold Fermentable Oligo, Di, Monosaccharides and Polyols. Family of poorly absorbed, Fibromyalgia level which indicates SIBO short-chain carbohydrates Rosacea If transit is too fast then false positive is given. lactose, fructose, **Therapeutic Nutritional** fructo-and galacto-oliogsaccharides (fructans and galactans) Intervention (Generic) Polyols (sorbitol, mannitol, xylitol and maltitol) **Medical Treatment** 5 R's Highly fermentable in the presence of gut bacteria (SIBO) Remove Antibiotic therapy Replace 1. Eliminate all FODMAPs foods from the diet for a trial period of 2 (Ciprofloxacin/ weeks. FODMAPs food classes: Lactose, Fructose, Fructans, Polyols, Reinoculate norfloxacin, Co-Galactooligosaccharides Repair trimoxazole oral, Re-Balance Rifaximin 400-500 mg 2. The challenge - add foods from one FODMAP class using a small and then larger twice daily for 7-10 days) load and observe for symptoms. Prokinetic agents 1. Remove 2. Replace 3. Reinoculate 4. Repair

5. Rebalance



The following supplements are suggested for you to consider in light of your relevant expertise and intimate understanding of the needs of your client or patient. They may be used in isolation or as part of a multi supplement strategy, but at all times the consideration of their use should be tied into the specific needs of the individual you are responsible for.

