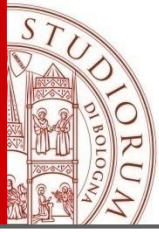


Sindrome dell'intestine irritabile (IBS):

La gestione del paziente in Farmacia

Dott. Andrea Lisotti
UOC Gastroenterologia - Ospedale di Imola
DIMEC - Università di Bologna



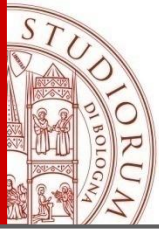


Agenda

Il paziente con stipsi

Il paziente con gonfiore

Il paziente con alvo alterno

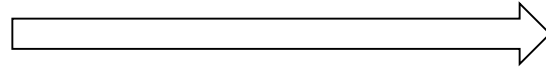


Agenda

Stipsi

Gonfiore

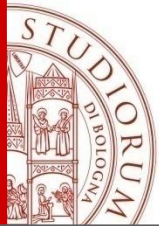
Alvo alterno



Diagnosi differenziale

Sintomi d'allarme

Approccio terapeutico



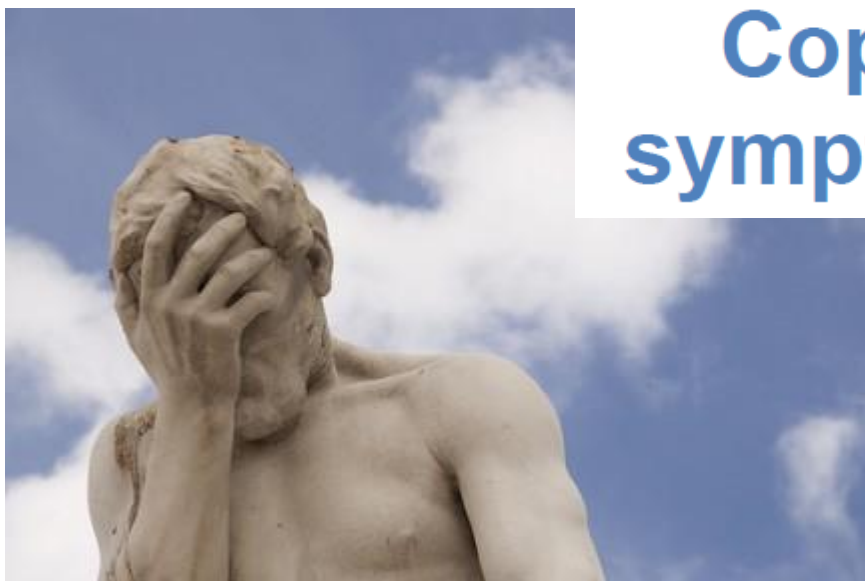
Il ruolo del farmacista



Il ruolo del farmacista

World Gastroenterology Organisation Global Guidelines

Coping with common GI symptoms in the community



A Resource Sensitive Solution

4.6 Abdominal pain/discomfort—management cascade

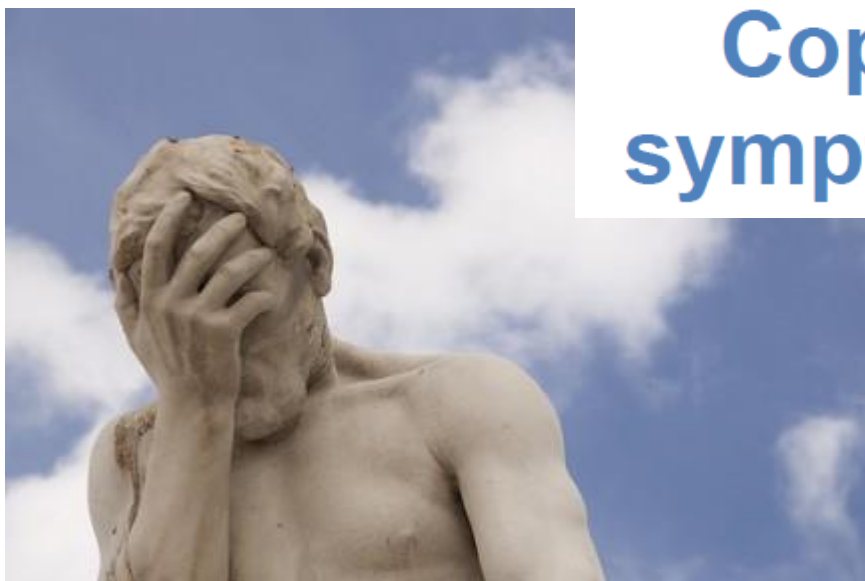
4.6.2 *Pharmacist*

- **Management:**

Il ruolo del farmacista

World Gastroenterology Organisation Global Guidelines

Coping with common GI symptoms in the community

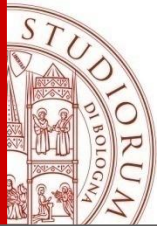


A Resource Sensitive Solution

4.6 Abdominal pain/discomfort—management cascade

4.6.2 Pharmacist

- Management:



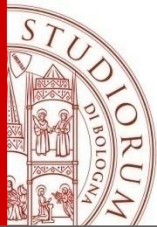
Il ruolo del farmacista

6 Constipation

Diagnosi differenziale:

- Stipsi cronica ed IBS-C fanno parte dello stesso spettro;
- Stipsi iatrogena (indotta da farmaci);
- Alterazioni anatomiche (rettocele, dolico-colon);
- Alterazioni post-chirurgiche (briglie aderenziali);
- Ipotiroidismo

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Il ruolo del farmacista

6 Constipation

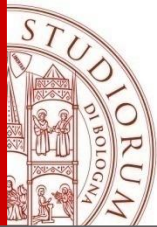
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Segni di allarme:

- Alterazioni recenti dell'alvo (stipsi acuta; comparsa di pseudo-diarrea);
- Calo ponderale;
- Sanguinamento (rettorragia, melena, ematochezia) o anemia;
- Età (> 50 anni) al momento dell'insorgenza e familiarità per CRC.

WGO Global Guidelines



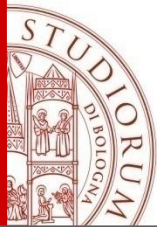
Il ruolo del farmacista

6 Constipation

6.6.2 Pharmacist

- *Management:*
 - Check for drug-induced constipation—opiates, iron therapy, calcium-based antacids, tricyclic antidepressants, antipsychotics, chemotherapy, anticholinergic medicines, antiparkinsonian medicines, antidiarrheal medicines slowing down intestinal transit, clay, or silicates.

WGO Global Guidelines



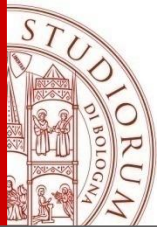
Il ruolo del farmacista

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 - Readily available traditional laxatives are the first-line treatment but are associated with high dissatisfaction rates [67].
 - Stimulant laxatives, such as senna, and osmotic laxatives, such as lactulose, may cause abdominal pain and result in watery stool followed by days with no bowel movement, thus mimicking constipation and leading to further doses and excessive laxation.

WGO Global Guidelines



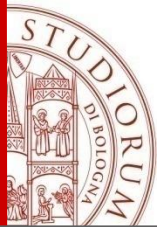
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WGO Global Guidelines



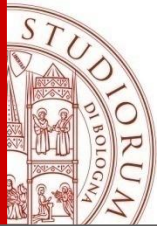
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 - Stimulant laxatives, such as senna, and osmotic laxatives, such as lactulose, may cause abdominal pain and result in watery stool followed by days with no bowel movement, thus mimicking constipation and leading to further doses and excessive laxation.
 - Glycerine suppositories.
 - With proper instruction, constipation can be managed without drugs most of the time.

WGO Global Guidelines



Approccio terapeutico - stipsi

Stipsi Funzionale

Cambiamento stile di vita



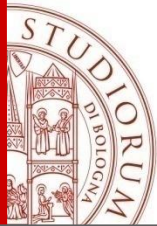
Approccio terapeutico - stipsi

Stipsi Funzionale

Cambiamento stile di vita

Self-care strategies:

- Diet:
 - Patients with constipation should be encouraged not to miss breakfast, when the gastrocolic reflex is at its height.
 - Include foods rich in fiber in the diet—e.g., fruit and vegetables, legumes, whole grains and seeds.
- Exercise and stress:
- Toilet visits:
 - Do not ignore the urge to pass a bowel motion.
 - The toilet sitting position can affect bowel function—lean well forward, with a straight back and with feet supported.
 - Expect a regular bowel action every 1–2 days.
- Ask a doctor/pharmacist for advice—if a medical condition or medicine causes constipation.



Approccio terapeutico - stipsi

Stipsi Funzionale

Cambiamento stile di vita

Agenti formanti massa



Approccio terapeutico - stipsi

Stipsi Funzionale

Cambiamento stile di vita

Agenti formanti massa

LASSATIVI		
Formanti massa (fibre insolubili e solubili)	Legando acqua aumentano la massa fecale e ne riducono la consistenza. Le fibre solubili aumentano anche la massa batterica	Crusca Psillio Metilcellulosa

Quando è stato confrontato con altri lassativi (lattulosio, bisacodile, ducosato, senna, solfato di magnesio) lo psyllio è risultato superiore nell'incrementare i movimenti intestinali e nel ridurre la consistenza delle feci^[22].

LIVELLO II di evidenza, GRADO B di raccomandazione.

Approccio terapeutico - stipsi

Stipsi Funzionale

Cambiamento stile di vita

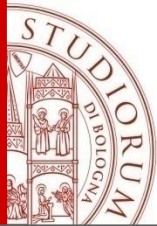
Agenti formanti massa

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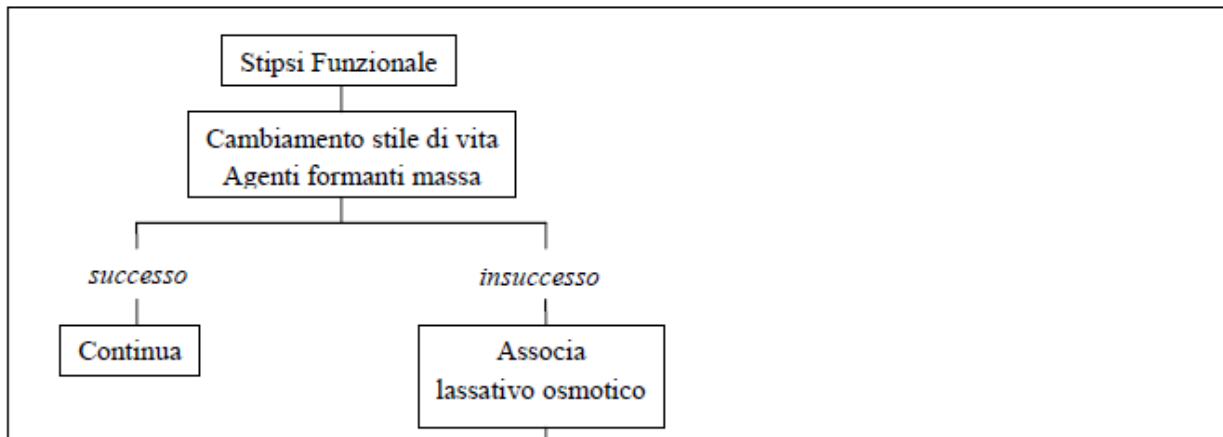
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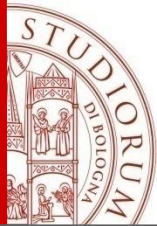
LIVELLO II di evidenza, GRADO B di raccomandazione.

In pz con IBS-C può esacerbare crampi, dolore e gonfiore

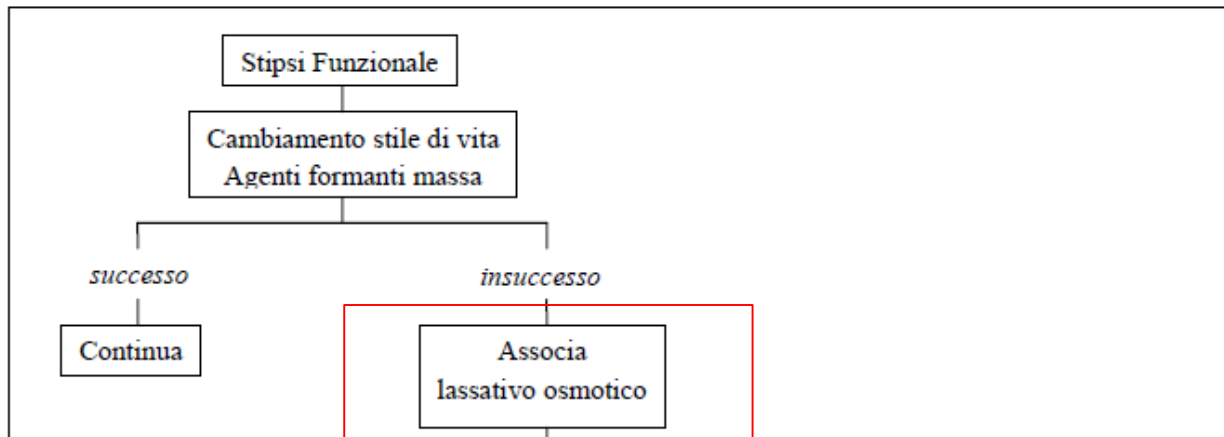


Approccio terapeutico - stipsi





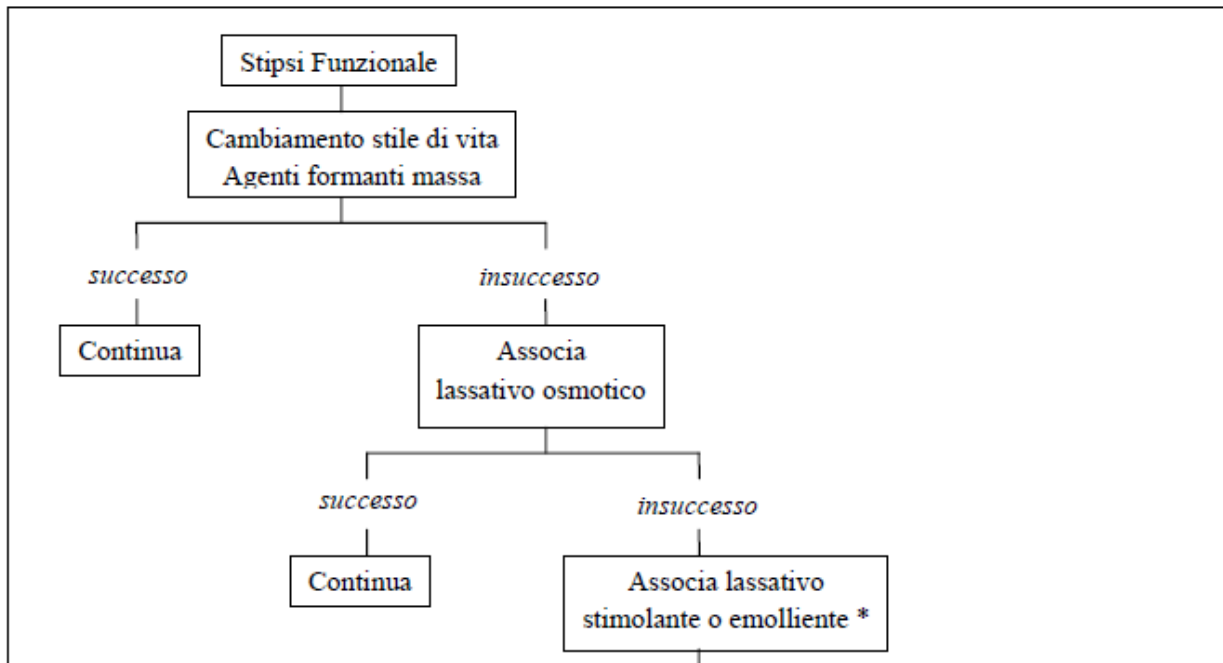
Approccio terapeutico - stipsi



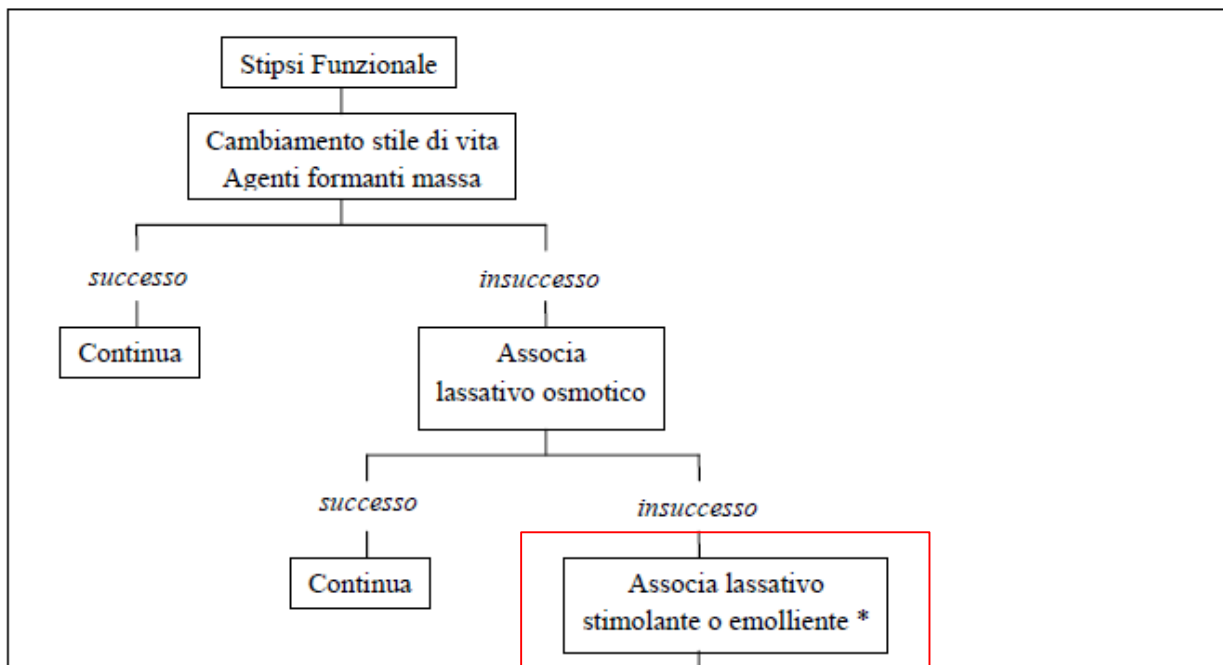
Osmotici	Legano acqua osmoticamente	
		Lattulosio Sorbitolo Idrossido di magnesio Sali di Magnesio Polietilenglicole



Approccio terapeutico - stipsi

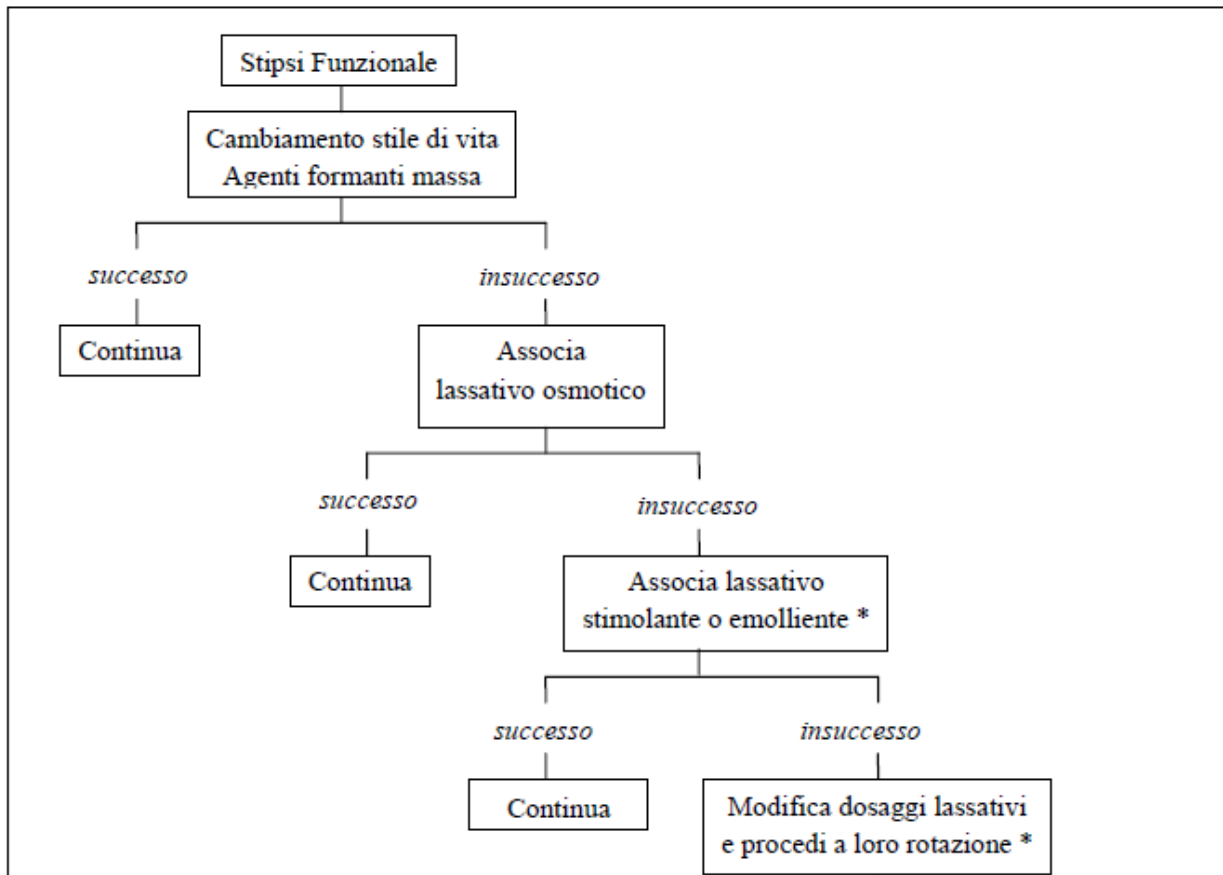


Approccio terapeutico - stipsi



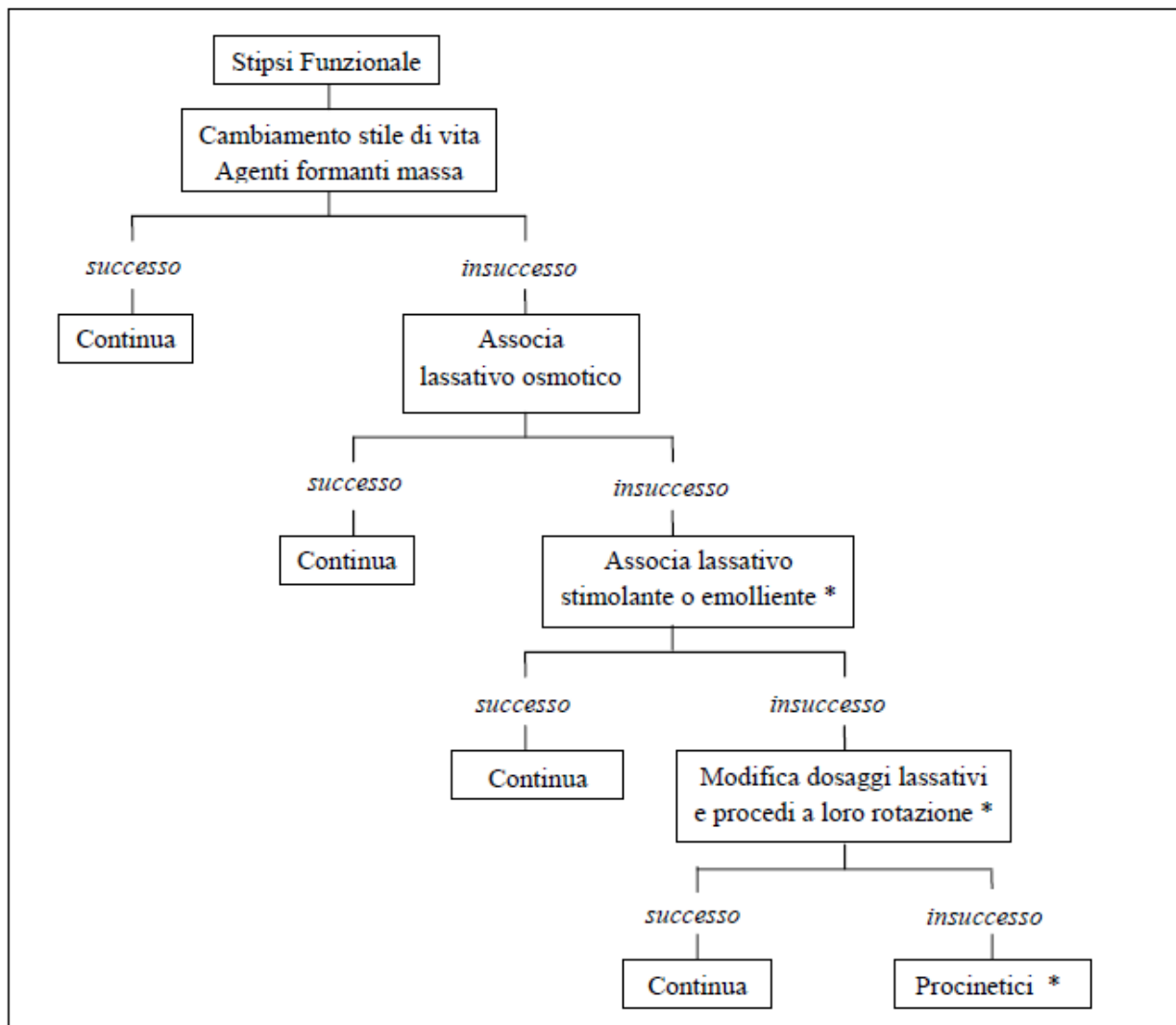
Emollienti	Legando acqua aumentano ed ammorbidiscono la massa fecale	Paraffina liquida Ducosati Glicerina
Stimolanti	Stimolano la peristalsi agendo sul plesso nervoso della muscolatura viscerale e riducono l'assorbimento di acqua ed elettroliti dal colon	Derivati antrachinonici: <i>senna, aloe, cascara</i> Derivati difenilmetano: <i>bisacodile, picosolfato</i>

Approccio terapeutico - stipsi

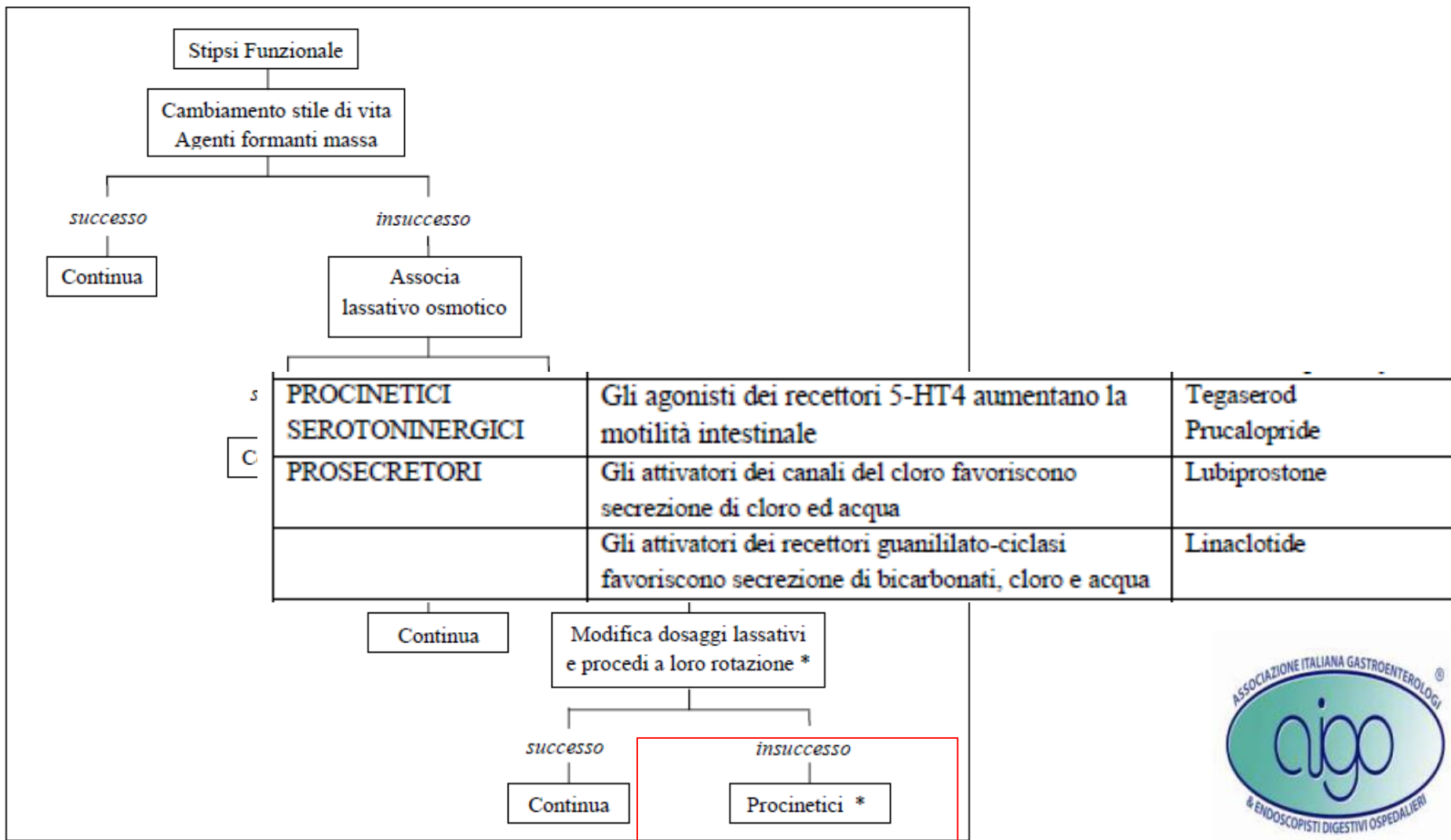


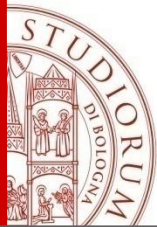
95% dei pazienti

Approccio terapeutico - stipsi



Approccio terapeutico - stipsi





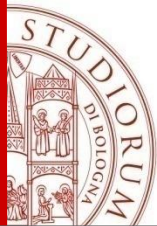
Il ruolo del farmacista

Bloating

Diagnosi differenziale:

- Gonfiore fisiologico o para fisiologico;
- IBS (crampi, discomfort, alterazioni dell'alvo);
- Dispepsia funzionale;
- Malattia celiaca
- Stipsi cronica
- Overgrowth batterico
- Diverticolosi
- Fattori dietetici (intolleranza al lattosio o fruttosio, non-celiac gluten sensitivity, etc)

WGO Global Guidelines



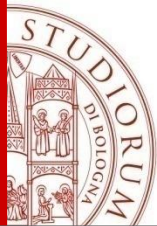
Il ruolo del farmacista

Bloating

5.6.2 *Pharmacist*

- Any pharmacotherapy should be combined with lifestyle and dietary interventions:
 - Combine medications with lifestyle changes.
 - Herbal medicine, homeopathy, aromatherapy are sometimes recommended, but without any evidence of efficacy.
- Medication—over-the-counter preparations containing simethicone and activated charcoal are still being used for gas and bloating symptoms, but their usefulness is questionable. Some studies of probiotic preparations containing bacterial species such as *Lactobacillus* and *Bifidobacterium* have reported improvement in bloating and flatulence [61].

WGO Global Guidelines



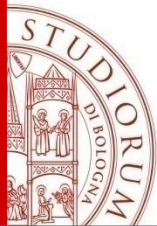
Il ruolo del farmacista

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WGO Global Guidelines



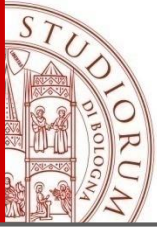
Il ruolo del farmacista

Bloating

5.6.2 *Pharmacist*

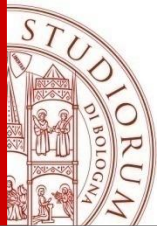
- Any pharmacotherapy should be combined with lifestyle and dietary interventions:
 - Combine medications with lifestyle changes.
 - Herbal medicine, homeopathy, aromatherapy are sometimes recommended, but without any evidence of efficacy.
- Referral to the physician:
 - When bloating lasts several weeks or worsens.
 - When other symptoms are present, such as diarrhea or constipation, abdominal pain, vomiting, coughing up blood, weight loss, etc.
 - Bloating may indicate more sinister causes if accompanied by weight loss, diarrhea, abdominal pain, occurring especially after food intake, as well as when there is an abdominal mass.
 - A total absence of passage of gas and stools, accompanied by severe abdominal pain, requires urgent consultation.

WGO Global Guidelines



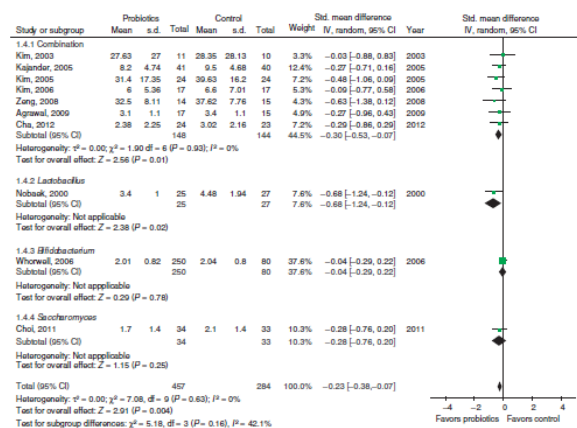
Il ruolo del farmacista

Dove collocare le formulazioni simbiotiche ???



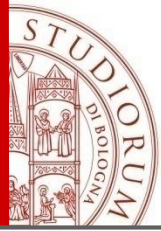
Il ruolo del farmacista

Efficacy of Prebiotics, Probiotics, and Synbiotics in Irritable Bowel Syndrome and Chronic Idiopathic Constipation: Systematic Review and Meta-analysis



Received 25 February 2014; accepted 30 April 2014

The American Journal of GASTROENTEROLOGY



Il ruolo del farmacista

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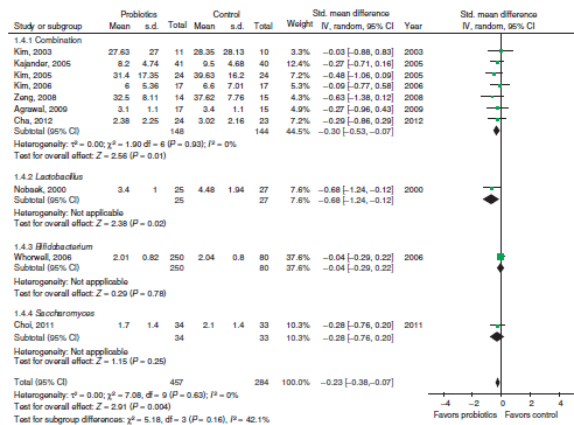


Table 2. Characteristics of randomized controlled trials of probiotics vs. placebo in chronic idiopathic constipation

Study	Country and recruitment	Criteria used to define symptom improvement following therapy	Sample size (% female) and diagnostic criteria for CIC	Probiotic used and duration of therapy	Methodology
Koebrick (66)	Germany, recruited from a naturopathic practice	Improvement in constipation	70 (53), clinical criteria	<i>L. casei</i> Shirota (6.5×10^9 c.f.u. in a 65 ml beverage) for 4 weeks	Method of randomization and concealment of allocation are not stated. Double-blind. Unclear if other CIC medications are allowed.
Yang (68)	China, secondary care	Mean number of stools per week	135 (100), clinical criteria	<i>B. lactis</i> DN-173010 (1.25×10^{10} c.f.u./pot), <i>S. thermophilus</i> and <i>L. bulgaricus</i> (1.2×10^9 c.f.u./pot) b.i.d. for 2 weeks	Randomization and concealment of allocation are not stated. Double-blind. Unclear if other CIC medications are allowed.
Sakai (67)	Belgium, recruited from a drug research unit	<25% Of bowel movements Bristol Stool Scale <3, mean number of stools per week	40 (57.5), Rome III	<i>L. casei</i> YIT 9029 FERM BP-1366 (6.5×10^9 c.f.u.) for 3 weeks	Randomization and concealment of allocation are not stated. Open study. Unclear if other CIC medications are allowed.

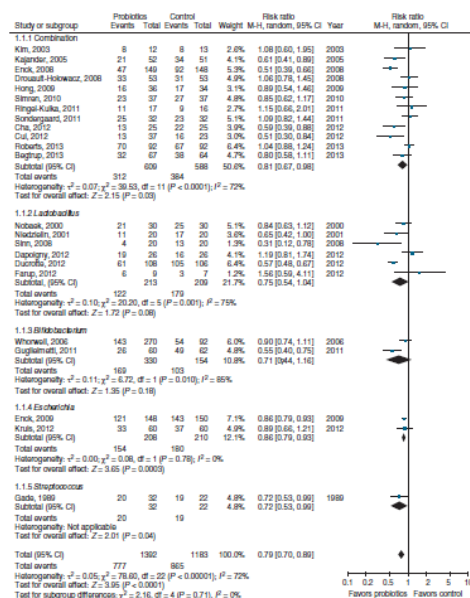
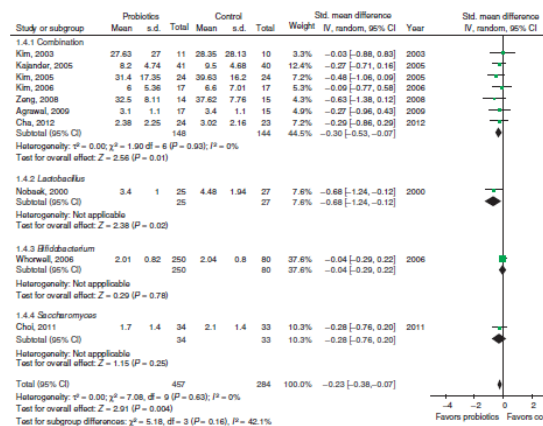
c.f.u., colony-forming units; CIC, chronic idiopathic constipation.

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Il ruolo del farmacista

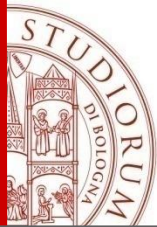
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135 (100), clinical criteria	<i>B. lactis</i> DN-173010 (1.25 x 10 ¹⁰ c.f.u./pot), <i>S. thermophilus</i> and <i>L. bulgaricus</i> (1.2 x 10 ⁹ c.f.u./pot) b.i.d. for 2 weeks	Randomization and concealment of allocation are not stated. Double-blind. Unclear if other CIC medications are allowed.
40 (57.5), Rome III	<i>L. casei</i> YIT 9029 FERM BP-1366 (6.5x10 ⁸ c.f.u.) for 3 weeks	Randomization and concealment of allocation are not stated. Open study. Unclear if other CIC medications are allowed.

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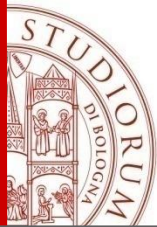


Il ruolo del farmacista

Dove collocare le formulazioni simbiotiche ???

High-fibre diet and *Lactobacillus paracasei* B21060 in symptomatic uncomplicated diverticular disease

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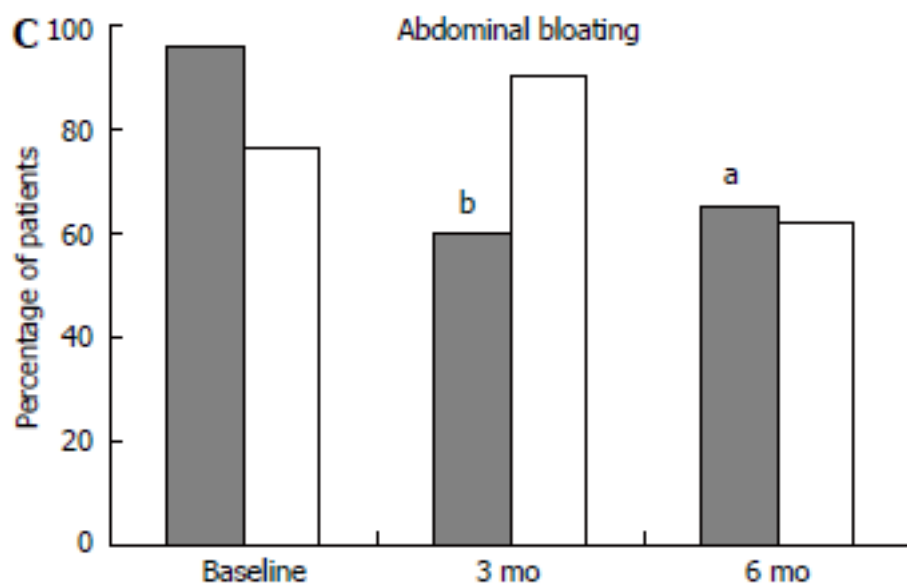


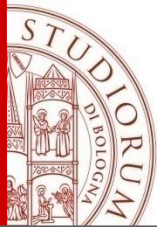
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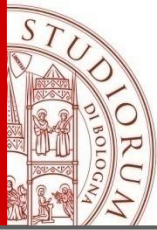


Il ruolo del farmacista

Effect of a new synbiotic supplement on symptoms, stool consistency, intestinal transit time and gut microbiota in patients with severe functional constipation: a pilot randomized double-blind, controlled trial

A monocentric, randomized, double-blind, controlled study was carried out at Montecatone Rehabilitation Institute S.p.A., Division of Gastroenterological Rehabilitation (Imola, Italy). This Institute is a third-level care center involved in the treatment of functional bowel disorders, defecation in particular.

Tech Coloproctol (2014) 18:945–953



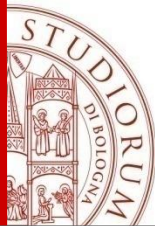
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Methods We conducted a pilot randomized, double-blind, controlled trial. After a 2-week run-in period, patients from a tertiary care setting with severe functional constipation fulfilling the Rome III Diagnostic Criteria in the past year were randomly assigned to receive by mouth 2 bags/day of Psyllgel Megafermenti[®] (Group A) or 2.8 g of maltodextrin twice daily (Group B) for 8 weeks. Primary end-

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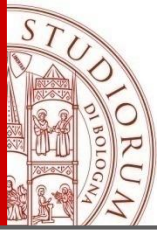
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Methods We conducted a pilot randomized, double-blind, controlled trial. After a 2-week run-in period, patients from a tertiary care setting with severe functional constipation fulfilling the Rome III Diagnostic Criteria in the past year were randomly assigned to receive by mouth 2 bags/day of Psylllogel Megafermenti® (Group A) or 2.8 g of maltodextrin twice daily (Group B) for 8 weeks. Primary end-



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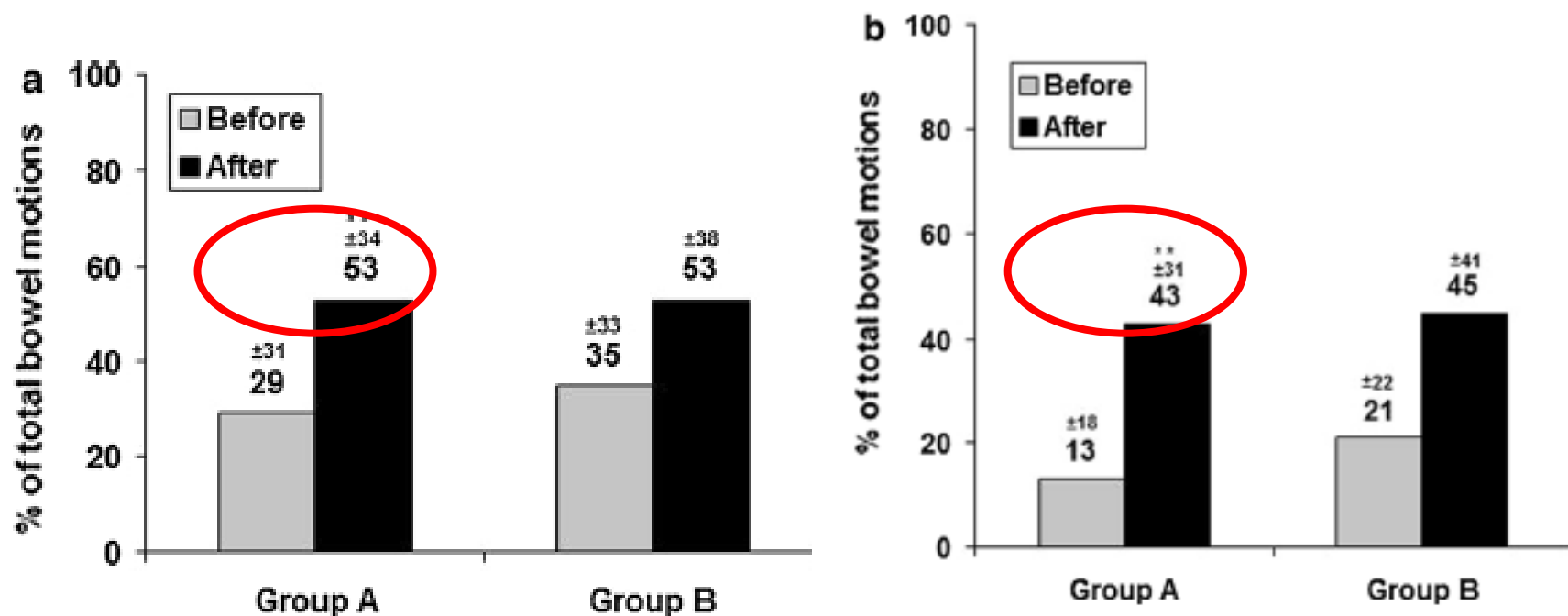
Il ruolo del farmacista

Effect of a new synbiotic supplement on symptoms, stool consistency, intestinal transit time and gut microbiota in patients with severe functional constipation: a pilot randomized double-blind, controlled trial

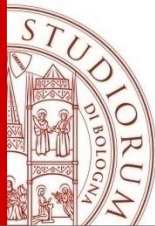
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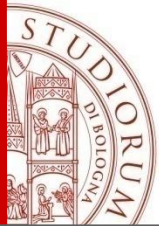


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Conclusions An 8-week treatment with Psyllogel Megafermenti[®] improved the main clinical parameters of functional constipation in patients extremely homogeneous for disorder severity and underlying pathophysiology ([Eudract. ema.europa.eu](http://eudract.ema.europa.eu), No. 2008-000913-30).

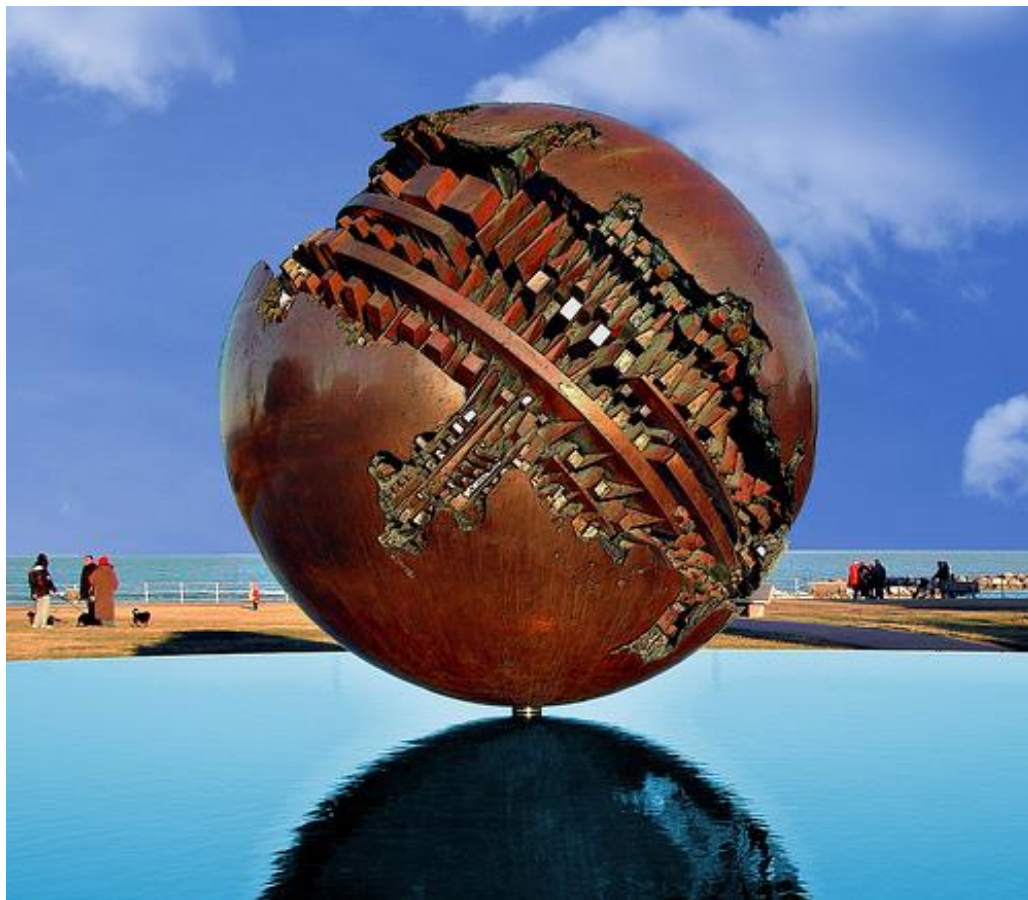
Tech Coloproctol (2014) 18:945–953



Grazie dell'attenzione ...



E per la pazienza !!!



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