

Treating irritable bowel syndrome with a food elimination diet followed by food challenge and probiotics.

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OBJECTIVE: In Irritable Bowel Syndrome, the gut-associated immune system may be up-regulated resulting in immune complex production, low-grade inflammation, loss of Class I bacteria, and translocation of inflammatory mediators and macromolecules outside of the GI lumen. Since food intolerance may be one of the reasons for this upregulation, our goal was to investigate the role of food intolerance in IBS patients. **METHODS:** In this open label pilot study, we enrolled 20 patients with IBS by Rome II criteria (15 women, ages 24-81) who had failed standard medical therapies in a tertiary care GI clinic. Baseline serum IgE and IgG food and mold panels, and comprehensive stool analysis (CSA) were performed. Breath-hydrogen testing and IBS Quality-of-Life (QOL) questionnaires were obtained. Patients underwent food elimination diets based on the results of food and mold panels followed by controlled food challenge. Probiotics were also introduced. Repeat testing was performed at 6-months. We followed up with this cohort at 1 year after trial completion to assess the reported intervention and for placebo effect. **RESULTS:** Baseline abnormalities were identified on serum IgG food and mold panels in 100% of the study subjects with significant improvement after food elimination and rotation diet ($p < 0.05$). Significant improvements were seen in stool frequency ($p < 0.05$), pain ($p < 0.05$), and IBS-QOL scores ($p < 0.0001$). Imbalances of beneficial flora and dysbiotic flora were identified in 100% of subjects by CSA. There was a trend to improvement of beneficial flora after treatment but no change in dysbiotic flora. The 1-year follow up demonstrated significant continued adherence to the food rotation diet (4.00 +/- 1.45), minimal symptomatic problems with IBS (4.00 +/- 1.17), and perception of control over IBS (4.15 +/- 1.23). The continued use of probiotics was considered less helpful (3.40 +/- 1.60). **CONCLUSION:** These data demonstrate that identifying and appropriately addressing food sensitivity in IBS patients not previously responding to standard therapy results in a sustained clinical response and impacts on overall well being and quality of life in this challenging entity.