Complementary Treatment and Markers in Inflammatory Bowel Diseases

Akademisk avhandling

Som för avläggande av medicine doktorsexamen vid Sahlgrenska Akademien vid Göteborgs universitet kommer att offentligen försvaras I aulan, Centralkliniken Sahlgrenska Universitetssjukhuset/Östra sjukhuset, Göteborg, fredagen den 21 februari, 2014, klockan 13.00

av

Maria Pagoldh

Fakultetsopponent: Professor Rune Sjödahl
Institutionen för klinisk och experimentell medicin, Hälsouniversitetet Linköping

This thesis is based on the following studies, referred to in the text by their Roman numerals.

I. Pagoldh M, Lange S, Jennische E, Almer S, Boström E A, Eriksson A. Faecal analysis and plasma C3c levels at admission for an acute attack of ulcerative colitis are predictive of the need for colectomy. Accepted for publication in Eur J Gastroenterol Hepatol


Complementary Treatment and Markers in Inflammatory Bowel Diseases

Maria Pagoldh
Institute of Medicine, Department of Molecular and Clinical Medicine, Sahlgrenska Academy at University of Gothenburg, Gothenburg, Sweden

ABSTRACT

Aims: The aims of this thesis were to evaluate potential prognostic markers and addition of complementary treatments in inflammatory bowel diseases.

Background: Inflammatory bowel diseases, the two main types of which are ulcerative colitis and Crohn’s disease, affect nearly 1% of the Scandinavian population and implies a risk of a chronic progressive, disabling disease. When considering treatment options, issues are: predicting short and long-term prognosis, selecting optimal treatment options and providing appropriate care for complications of the conditions or treatments.

Methods: Selected variables were investigated to determine their ability to predict colectomy in an early phase of a severe attack of ulcerative colitis in patients admitted to hospital. Hyperbaric oxygen treatment was tested as a complementary treatment in acute severe ulcerative colitis. Addition of supplementary treatment with cereals was evaluated in patients with sequelae after intestinal resections.

Results and Conclusions: Analyses of stool frequency, faecal weight and complement factor 3c in plasma may contribute to an early prediction of the disease course in a severe attack of ulcerative colitis. Hyperbaric oxygen treatment as a complementary treatment in a severe attack of ulcerative colitis does not improve clinical outcome. Specially processed cereals, as well as non-processed cereals, can be safely used in patients with previous intestinal resections. Intake of non-processed cereals may decrease faecal volume in these patients.

Key words: inflammatory bowel diseases, ulcerative colitis, Crohn disease, predictor, complementary therapies, hyperbaric oxygen therapy

http://hdl.handle.net/2077/34071

Gothenburg 2014