

Effect of Intestinal Microbiota Transplantation on Intestinal Flora and Inflammatory Factor Levels in Patients with Ulcerative Colitis [Letter]

Indah Lestari Daeng Kanang 

Department of Internal Medicine, Faculty of Medicine, Universitas Muslim Indonesia, Makassar, Indonesia

Correspondence: Indah Lestari Daeng Kanang, Department of Internal Medicine, Faculty of Medicine, Universitas Muslim Indonesia, Makassar, Indonesia, Email indahlestaridaeng.kanang@umi.ac.id

Dear editor

I have read the paper by Zhi Wang et al on the Effect of Intestinal Microbiota Transplantation on Intestinal Flora and Inflammatory Factor Levels in Patients with Ulcerative Colitis.¹ I congratulate the authors for providing updated information regarding the role of the gut microbiota in the treatment of patients suffering from Ulcerative Colitis. The findings in this study can be used as a consideration for the choice of therapy for Ulcerative Colitis patients in addition to giving anti-inflammatory drugs such as Dexamethasone because Microbiota Transplantation on Intestinal is still a new therapy in the world of health.²

A study conducted by Zhi Wang et al proved that intestinal microbiota transplantation can improve the condition of the gut microbiota in ulcerative colitis patients, reduce excessive inflammatory responses, and facilitate restoration of intestinal mucosal function without any significant side effects.¹ However, care should be taken in the selection. The right donor is recommended to do an examination of the donor's bacterial profile first.³ In addition, I also want to provide the latest information regarding conventional probiotics which can affect the nature of the microbiota in the human intestine, this therapy can be a prevention and treatment for patient ulcerative colitis that targets a deregulated immune response as well as intestinal dysbiosis as supported by a number of clinical trials. Probiotics help maintain remission for a longer time and improve the quality of life for ulcerative colitis patient.⁴

The study conducted by Zhi Wang et al used correspondents of patients diagnosed with ulcerative colitis who were divided into a control group that was given oral mesalamine and an intervention group that was given oral mesalamine plus intestinal microbiota transplantation.¹ The method used has been able to assess the effectiveness of intestinal microbiota transplantation, however I recommend adjunctive therapy such as administration of conventional probiotic strains with common approaches applied in disease management to modify gut microbiota, improve gut barrier integrity and function, and maintain a balanced immune response.⁴ In addition, intestinal microbiota transplantation can also help doctors predict the success of ulcerative colitis treatment.⁵

In conclusion, I agree that intestinal microbiota transplantation can efficiently improve the condition of the intestinal microbiota of ulcerative colitis patients, reduce the inflammatory response in the patient's body and assist in the restoration of the function of the intestinal mucosal layer and also act as a reservoir for potentially pathogenic organisms. The presence of disturbances in the intestinal microbiota can increase the risk of invasive infection from intestinal pathogens.¹ Therefore, a strategy to restore the composition of the intestinal microbiota is a potential strategy that should be of primary concern to reduce the risk of developing cases of ulcerative colitis.³ However, I also recommend giving conventional probiotic therapy, which can help maintain remission for a longer time and improve the quality of life of ulcerative colitis patients.⁴

Disclosure

The author reports no conflicts of interest in this communication.

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