Rectal Evacuation Disorder Associated with a Higher Rate of Small Intestinal Bacterial Overgrowth Diagnosis **Compared to Slow Transition Constipation**



Wendy Zhou, DO, Leila Neshatian, MD, Houssam Halawi, MD Division of Gastroenterology and Hepatology, Stanford University School of Medicine, Stanford, CA 94305

BACKGROUND

- Small intestinal bacterial overgrowth (SIBO) is • being more and more recognized as a potential comorbidity in patients with constipation
- SIBO may cause additional symptoms in • patients with constipation, thus posing as a challenge to the management of symptoms in this patient population

AIM

We aimed to compare the rate of SIBO diagnosis in patients with rectal evacuation disorder (RED) to that in patients with slow transit constipation (STC)

METHODS

- The electronic medical records of patients • aged 18 or more were screened for the diagnoses of RED and STC between year 2015 and present at a tertiary care center in Northern California
- We then screened the results for a diagnosis of SIBO based on a hydrogen breath test and an established SIBO diagnosis within one year
- Chi-squared statistic was used to compare the rate of SIBO in patients with RED to that in patients with STC

RESUL

	Rectal Evacuat Disorder (n=319)
Mean Age (SD)	57.7 (15.9)
Female, n (%)	256 (80)
Male, n (%)	63 (20)

Table 1. Patient demographics





ΓS	
ion	Slow Transit Constipation (n=954)
	58.7 (19.9)
	597 (63)
	357 (37)
6.	
gnosis (%) in patients t in patients with STC	
P=0.000081	
Slow T	ransit Constipation

SUMMARY

RED is associated with an increased rate of a SIBO diagnosis compared to slow transit constipation

DISCUSSION AND CONCLUSION

- Untreated RED may offer one explanation for the recurrent nature of SIBO in patients with constipation
- RED should thus be suspected and screened for in patients with constipation who are diagnosed with SIBO
- Prospective research is needed to better understand the effect of RED on gut microbiome