UEG Week Press Release

Faecal microbiota transplantation (FMT) now officially recommended for the effective treatment of *C. difficile* infection

(Vienna, October 26, 2014) The transplantation of faecal microbiota from a healthy donor has been shown in recent clinical studies to be a safe and highly effective treatment for recurrent *Clostridium difficile* (*C. difficile*) infection and is now recommended in European treatment guidelines.1,2 Faecal microbiota transplantation (FMT) has emerged as a revolutionary, potentially life-saving treatment for this common, difficult-to-treat infection, and is showing promise in the management of other microbiota-related conditions.3,4

Presenting at the 22nd United European Gastroenterology Week (UEG Week 2014) in Vienna, Austria, Professor Antonio Gasbarrini from the Gemeli University Hospital in Rome believes that FMT should now be used more widely in order to reduce both the clinical and economic burden of microbiota-related disease. “FMT is an old procedure that has gained in popularity in recent years,” he says. “When used in patients with recurrent *C. difficile* infections, which are extremely difficult to treat, FMT eradicates the bacteria in around 90% of cases with a good safety profile.”

The challenges of *C. difficile* infection
*C. difficile* infection is the most common cause of hospital-acquired diarrhoea, and is associated with significant morbidity and mortality in hospitalized patients. Infection rates have been rising rapidly in Europe and reports of emerging new strains, growing antibiotic resistance, and increased susceptibility in non-hospitalized individuals are of grave concern. *C. difficile* infection causes severe diarrhoea, intestinal inflammation and toxin-mediated cell death that, in severe cases, can lead to shock, hypotension, ileus or megacolon. Standard first-line therapies include the antibiotics, vancomycin or metronidazole, which are initially effective in most individuals. Unfortunately, approximately 20% of successfully-treated patients will have an infection recurrence, and many of these will experience multiple recurrences.5

“Recurrent *C. difficile* infections are particularly difficult to treat, with long courses of antibiotics further disrupting the normal gut microflora, putting the patient at great risk of serious complications such as sepsis or perforation of the bowel,” says Prof. Gasbarrini. “There is an urgent need for more effective treatments for recurrent *C. difficile* infections and FMT is definitely one of them.”

FMT for *C. difficile* infection
FMT is an innovative treatment that was first described in *C. difficile* infection in the 1950s, and is being used increasingly in everyday practice. In FMT, healthy microbiota harvested from a donated stool sample is transplanted into the intestine of the recipient – often by colonoscopy or enema – where it helps to restore the normal composition of the gut flora and overcome the toxic consequences of *C. difficile* infection.

Studies in patients with *C. difficile* infection have confirmed that the treatment has a good safety record and is highly effective – quickly eradicating recurrent infections in around 90% of patients.5,6 While once considered a last-resort option for only the brave or desperate, FMT is now officially recommended in influential European treatment guidelines for recurrent *C. difficile* infections.1,2
“FMT can be considered a very simple form of organ transplantation that does not require immunological matching of donor and recipient and does not need immunosuppression after the procedure,” says Prof. Gasbarrini. “I am delighted that FMT has now been formally recognised as an effective treatment for recurrent \textit{C. difficile} infection and I hope the technique will now be used more widely in an effort to relieve some of the burden of this troublesome infection.”

References

Notes to Editors

About UEG Week
UEG Week is the largest and most prestigious gastroenterology meeting in Europe and has developed into a global congress. It attracts over 14,000 participants each year, from more than 120 countries, and numbers are steadily rising. UEG Week provides a forum for basic and clinical scientists from across the globe to present their latest research in digestive and liver diseases, and also features a two-day postgraduate course that brings together top lecturers in their fields for a weekend of interactive learning.

From October 18-22, 2014, UEG will connect everyone to its annual meeting via livestream on [www.ueg.eu](http://www.ueg.eu). State-of-the-art lectures of Europe’s largest GI meeting may be followed online from around the world. Include #UEGWeek in your tweets. UEG Week 24/7 features all recorded sessions from UEG Week and provides convenient and direct access to the complete congress material, including E-posters and abstracts.

About UEG
UEG, or United European Gastroenterology, is a professional non-profit organisation combining all the leading European societies concerned with digestive diseases. Together, its member societies represent over 22,000 specialists, working across medicine, surgery, paediatrics, gastrointestinal oncology and endoscopy. This makes UEG the most comprehensive organisation of its kind in the world, and a unique platform for collaboration and the exchange of knowledge.

To advance standards of gastroenterological care and knowledge across Europe and the world, UEG offers numerous activities and initiatives besides UEG Week, including:

- **UEG Education**, the universal source of knowledge in gastroenterology, providing online and classroom courses, a huge online library and delivering the latest GI news, fostering debate and discussion
- **Training Support**, funding for innovative training and educational programmes, as well as international scientific and professional co-operations
- **UEG Journal**, published bi-monthly, covering translational and clinical studies from all areas of gastroenterology
- **EU Affairs**, promoting research, prevention, early diagnosis and treatment of digestive diseases, and helping develop an effective health policy for Europe

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Press contacts
Samantha Forster
Email: media@ueg.eu
Tel: +44 (0)1444 811099