



Treatment options and possible underlying causes for SIBO:

SIBO (and also yeast overgrowth), are more commonly seen in patients with slow upper gut motility. This may be seen due to a number of issues including:

- Hypothyroidism (or poor Thyroid hormone metabolism with high RT3), which leads to poor gut motility / stasis in the upper GI tract
- Immune suppression (often seen in chronic infections and metals toxicity)
- Chronic gut inflammation due to ongoing food allergy / sensitivity.
- Hypochlorhydria (low stomach acid), often seen in patients with Helicobacter Pylori infection
- Bile insufficiency – Bile usually acts as a ‘soap’ to clean the small intestine and may be low due to gallstones / cholecystectomy, taurine deficiency (often seen due to yeast overgrowth), and in insufficient choline.
- Chronic stress – in the ‘fight or flight’ response, the digestive system doesn’t work properly and slowed MMC, loss of bile and low stomach acid favour the colonisation of the upper gut.

Unfortunately, Intestinal Methanogen overgrowth (IMO), due to Archaeabacter, is also a major cause of Migrating Motor complex (MMC) suppression as methane suppresses the natural muscle movement which squeezes the food and fluid along the small bowel from the stomach to the large intestine. This makes IMO more difficult to treat and more likely to recur.

When treating SIBO we do want to ensure that the underlying causes are addressed (where possible), or relapse rates after therapy are much higher. It’s important that we check thyroid function and consider how we may address any problems found before considering antibiotics or high dose herbal therapies.

Prokinetic use:

Increasing MMC movement can be achieved with a number of agents and is usually recommended in those with slow gut transit to prevent rapid relapse. Options include (can be used in combination):

- Ginger
- Serotonin mimic Prucalopride / Resolor (requires prescription)
- Serotonin boosting amino acid 5-HTP
- SSRI medication may also help if being used for low mood (Eg. Fluoxetine, sertraline)
- Low Dose Naltrexone (also used for autoimmunity and chronic immune responses to infections)
- Liothyronine / T3 (the active thyroid hormone), in those who are deficient

Anti-bacterials:

Reducing the bacterial overgrowth can be achieved with antibiotics in various ways including:

- Herbal Medicine: Typically Allicin (from garlic), for methanogens with an added combination of Oregano / Berberine / Neem for hydrogen producers.
- Prescription Medicine: Combinations of Rifaximin (with Neomycin for methanogen overgrowth)

Although not always tolerated (due to increase in gas fermentation and bloating), antibacterial agents actually work better when taken alongside a prebiotic food or supplement as this increases the activity of the bacteria and makes them more susceptible to the herbal / antibiotic therapy. We will often use Partially Hydrolysed Guar Gum (or PHGG).

Conservative Management options:

- Starving the bacteria with the elemental diet or a low FODMAP diet is effective for many patients with chronic / recurrent SIBO who may have underlying health issues which are not easy to remedy. We also find a very low carb / Ketogenic diet can also do a good job of this for some people.
- High dose vitamin C can also be used to suppress SIBO in those with constipation-predominant issues (will make diarrhoea worse).
- Very high dose probiotics have also been shown to be effective in some patients. High strength products such as Symprove and soil based probiotics can also be very useful in both treatment and post-therapy maintenance.
- Atrantil is a specific herbal medication which can help to treat methanogen overgrowth and maintain remission post therapy.

