Gut News You Can Use

MY GUT CARE
EXPERTS IN GUT HEALTH, LIVER AND ENDOSCOPY

We are delighted to welcome you to the second edition of Gut News You Can Use by My Gut Care.

This newsletter has been thoughtfully curated to share timely, relevant updates in gastroenterology and hepatology, featuring reviews of key research, case studies and insights from our team of specialist doctors, dietitians and nurses. In future editions we will also highlight contributions from our highly experienced administrative team, reflecting our commitment to patient-centred, comprehensive care. We hope you find this resource valuable in supporting your patients. If there are any specific topics you would like our specialists to explore in upcoming editions, please do not hesitate to send your enquiry to support@qgos.com.au.

Restoring Healthy Gut Microbes

Gut Microbiome
Your Body's Silent Health Guardian

Our gut is home to trillions of microbes — bacteria, viruses, and fungi — that play a crucial role in digestion, immunity, and overall health. Diet is one of the most powerful ways to support a healthy gut microbiome. Certain foods can improve microbial balance and reduce disease risk.

Gut Health and Disease
When gut microbes are out of balance (dysbiosis), it can lead to inflammation, leaky gut, and signals that affect the brain. This imbalance has been linked to digestive issues, mental health conditions, obesity, diabetes, neurodevelopmental and immune dysfunction.

Gut Microbiota and Brain Health: A Two-Way Street
What we eat has a profound impact on our brain, mental well-being, and cognitive function — and, conversely, the condition of our brain can shape our dietary choices. The gut and brain are closely linked in a two-way communication system called the gut-brain axis. The gut can send signals to the brain, and the brain can influence gut function and gut microbes play a key role in this connection.

References

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3. Merlo G, Bachtel G, Sugden SG. Gut microbiota, nutrition, and mental health. Front Nutr. 2024;11:1337889.
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5. Teigen LM, Hoeg A, Zehra H, Shah P, Johnson R, Hutchison K, et al. Nutritional optimization of fecal microbiota transplantation in humans: a scoping review. Gut Microbes. 2025;17(1):2446378. https://doi.org/10.1080/19490976.2024.2446378
6. Clancy AK, Gunaratne AW, Borody TJ. Dietary Management for Faecal Microbiota Transplant: An International Survey of Clinical and Research Practice, Knowledge and Attitudes. Front Nutr. 2021;8:653653.

Featured Articles

1. **Supporting Your IBD Patients Through the Festive Season**
2. **Gut-Friendly Diets and MAFLD: Festive Season Considerations for Patients**
3. **Vitamin D Shows Promise Against Fatty Liver**

Reminder: Faecal Calprotectin Testing Now on MBS (Item 66522)

The faecal calprotectin test for diagnosing inflammatory bowel disease (IBD) is now available under MBS Item 66522 if all of the following criteria are met:

- Patient is under 50 years of age
- Gastrointestinal symptoms suggestive of inflammatory or functional bowel disease for >6 weeks

This provides a convenient non-invasive tool to help distinguish IBD from functional bowel disorders in appropriate patients.

Parisa Sekhavati
Accredited Practicing Dietitian

Fecal Microbiota Transplantation

Faecal microbiota transplantation (FMT) involves transferring processed stool from a carefully screened healthy donor into a recipient's bowel to restore microbial balance and diversity. FMT shows growing promise in managing inflammatory bowel disease (IBD), irritable bowel syndrome (IBS), and metabolic disorders.

The Vital Role of Diet in FMT

Dietary factors surrounding the FMT procedure are increasingly recognised as key determinants of success. Because transplanted microbes rely on dietary substrates for survival, diet before and after FMT directly influences microbial engraftment, stability, and function.

Pre-FMT nutrition

Diet plays a pivotal role in preparing both the donor and recipient microbiomes. Donor dietary habits shape the microbial composition and functional potential of the transplanted stool. For recipients, optimising diet and nutritional status prior to FMT enhances gut readiness and reduces complications.

Post-FMT nutrition

Diet serves as the primary tool to sustain and stabilise the transplanted microbiota. Evidence suggests that fiber supplementation —particularly with pectin or mixed fermentable fibers—supports microbial diversity, short-chain fatty acid production, and symptom improvement in conditions such as constipation and ulcerative colitis. Structured dietary patterns combined with FMT show potential additive benefits

GINGER: A LITTLE ZING FOR YOUR DIGESTION

A 2025 Systematic Review suggests that ginger may reduce gut inflammation, support a healthy microbiome, and protect against oxidative stress.

Reference

Paudel KR, Orent J, Penela OG. Pharmacological properties of ginger (Zingiber officinale): what do meta-analyses say? a systematic review. Front Pharmacol. 2025 Jul 30;16:1619655. doi: 10.3389/fphar.2025.1619655. PMID: 40808693; PMCID: PMC12343617.

Supporting Your IBD Patients Through the Festive Season

The holiday period can be challenging for people living with Crohn's disease and ulcerative colitis. Rich foods, disrupted routines, travel, and increased social commitments may contribute to symptom flares or anxiety around symptom management.

To assist your patients in maintaining stability and confidence during this time, here are six practical strategies you can encourage them to use.

Six Gut-Friendly Holiday Strategies to Share With Your IBD Patients

1. Encourage Forward Planning
Advise patients to review menus ahead of events, eat something well-tolerated before gatherings, or bring a safe dish. Planning reduces exposure to common dietary triggers.

2. Reinforce the Importance of Stress Management
Remind patients that stress can exacerbate gastrointestinal symptoms. Encourage consistent sleep, rest breaks, and simple calming practices such as breathing exercises or gentle movement.

3. Recommend a Personal "Travel Kit"
Patients may benefit from carrying wipes, spare clothing, prescribed medications, and knowing bathroom locations in advance. This can significantly reduce anxiety during outings or travel.

4. Normalise Boundary-Setting
Let patients know it's appropriate to scale back or decline plans during periods of increased symptoms. Encourage them to communicate within their comfort level and prioritise health.

5. Promote Non-Food-Centric Activities
Suggest focusing on social connection rather than meals alone — for example, walks, games, movie nights, or festive activities that reduce pressure around eating.

6. Advise Mindful Eating
Encourage small, frequent meals, slow chewing, avoidance of known triggers, and close attention to body cues. Mindful eating can help reduce discomfort and prevent symptom flares.

A Supportive Reminder
The festive season doesn't need to be a period of heightened symptom anxiety for people with IBD. With preparation, appropriate self-management strategies, and support from their care team, many can enjoy the holidays comfortably and confidently.

If any of your patients require personalised management, medication review, or flare support over the holiday period, the My Gut Care team is available to assist.

Deakin's GLOW Trial Targets Long COVID via Gut Microbiome

Deakin University's GLOW Trial is studying whether faecal microbiota transplantation (FMT) can help treat Long COVID symptoms like fatigue, depression, and poor sleep. The trial explores the role of the gut microbiome in Long COVID and tests if restoring gut health improves patient outcomes.

It's a randomised, double-blind, placebo-controlled study using enema-delivered FMT in adults with Long COVID. Early studies suggest FMT may alleviate symptoms such as insomnia and fatigue.

Further information: https://foodandmoodcentre.com.au/projects/gut-therapy-to-improve-long-covid-outcomes-and-wellbeing-the-glow-trial/

Saffron: A Promising Adjunct in IBD Management

Study: "Saffron as a Promising Therapy for Inflammatory Bowel Disease"
Source: Nutrients, 2024

Overview:
Recent evidence suggests that saffron, a natural spice, may have therapeutic potential in inflammatory bowel disease (IBD). Its bioactive compounds appear to exert anti-inflammatory, antioxidant, and immunomodulatory effects, which could benefit patients with IBD.

Key Findings

- Anti-inflammatory: Reduces pro-inflammatory cytokines and intestinal inflammation.
- Antioxidant: Mitigates oxidative stress, a key contributor to IBD pathogenesis.
- Immunomodulatory: May help restore immune balance in the gut.

Clinical Relevance:
Saffron may be considered as a supplementary adjunct alongside standard IBD therapy. Evidence is still preclinical or early clinical; dosing, safety, and long-term efficacy require further study.

Key Takeaway:
"Saffron shows potential as a complementary therapy in IBD due to its anti-inflammatory and antioxidant effects. While encouraging, clinical evidence is still limited, so it should only be considered as an adjunct to standard treatment under medical supervision." – ***Dr Asif Shahzad***

Reference: Rashid M, Rashid R, Saroya S, Deverapalli M, Brim H, Ashktorab H. Saffron as a Promising Therapy for Inflammatory Bowel Disease. Nutrients. 2024 Jul 20;16(14):2353. doi: 10.3390/nu16142353. PMID: 39064796; PMCID: PMC11280066.

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Gut-Friendly Diets and MAFLD: Festive Season Considerations for Patients

Study: The association between the dietary index for gut microbiota and metabolic dysfunction-associated fatty liver disease: a cross-sectional study
Source: Diabetology & Metabolic Syndrome, 2025

Overview: Recent evidence from NHANES demonstrates that diets supporting gut microbiota, high in fibre, fruits, vegetables, legumes, and whole grains, are associated with significantly lower odds of metabolic dysfunction-associated fatty liver disease (MAFLD). Each 1-point increase in the Dietary Index for Gut Microbiota (DI-GM) corresponded to a 6% reduction in MAFLD risk.

Festive Season Patient Advice:

- Encourage inclusion of vegetables, legumes, and whole grains at festive meals.
- Advise moderation of processed foods, red meats, and sugary drinks.
- Small, practical changes e.g., alternating alcoholic drinks with water or adding a vegetable side can support gut and liver health.

Reference:

Zheng, Y., Hou, J., Guo, S. et al. *Diabetol Metab Syndr* 17, 17 (2025). https://doi.org/10.1186/s13098-025-01589-9

Vitamin D Shows Promise Against Fatty Liver

Study: Vitamin D supplementation alleviates high fat diet-induced metabolic associated fatty liver disease by inhibiting ferroptosis pathway.
Source: European Journal of Nutrition, 2024

Overview: Recent preclinical research suggests that vitamin D_3 supplementation may help protect the liver from metabolic dysfunction-associated fatty liver disease (MAFLD), particularly in the context of high-fat diets.

Clinical Relevance:

Design: Animal study exploring the effects of vitamin D_3 on high-fat diet–induced MAFLD.
Mechanism: Vitamin D reduced liver injury and fat accumulation, decreased oxidative stress, and inhibited ferroptosis — an iron-dependent form of cell death linked to liver damage.
Key pathways: Enhanced antioxidant enzymes and modulated ferroptosis-related proteins.

Clinical Takeaways

- Supports the emerging concept that vitamin D sufficiency may contribute to liver protection in patients at risk of MAFLD.
- Highlights the interplay between micronutrients, oxidative stress, and metabolic liver disease.
- While promising, these are preclinical findings, so direct translation to human therapy requires caution and further clinical trials.

Bottom Line
Monitoring vitamin D status and ensuring adequacy may be a low-risk, potentially beneficial adjunct in managing patients with metabolic risk factors for fatty liver.

"I found this study particularly interesting, as I routinely monitor vitamin D levels in patients with MAFLD. These findings further reinforce the value of assessing vitamin D status in this group. While the results are still preclinical, I would encourage GPs to continue checking vitamin D levels regularly in patients with MAFLD and to supplement when clinically appropriate." ***– Dr Asif Shahzad***

Reference:

Miao, Y., Jiang, Z., Song, H. et al. Vitamin D supplementation alleviates high fat diet-induced metabolic associated fatty liver disease by inhibiting ferroptosis pathway. Eur J Nutr 64, 50 (2025). https://doi.org/10.1007/s00394-024-03554-0

World-First IBS Trial Compares low FODMAP and CBT as treatment

Study: "World-first trial compares two opposite IBS treatments"
Source: University of Melbourne Newsroom, June 2025

Overview: An international research team led by the University of Melbourne is conducting a pioneering clinical trial to compare the effectiveness of two contrasting treatments for Irritable Bowel Syndrome (IBS): the low FODMAP diet and exposure-based cognitive behavioural therapy (CBT). The study aims to identify which treatment works best for whom, enabling clinicians to provide more personalised care.

Key Details:

- Participants: 200 individuals across Australia and the United States.
- Duration: 12 weeks of treatment with follow-up assessments at three and six months.
- Format: Remote participation with professional support from dietitians or psychologists.
- Objective: Determine which treatment is most effective for individual patients and understand the underlying mechanisms.

I'm very much looking forward to the results of this world-first trial, as a low FODMAP diet is not the only solution for IBS, reflecting what we know from both research and clinical experience. The study highlights the value of an multidisciplinary approach and reinforces the benefits of collaborating with dietitians and psychologists to deliver effective and individualised care. – ***Dr Asif Shahzad***

Further information: https://www.unimelb.edu.au/newsroom/news/2025/june/world-first-trial-compares-two-opposite-ibs-treatments

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MBBS, FRACP

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- ✓ Removal of Large Polyps
- ✓ ERCP
- ✓ Endoscopic Ultrasound
- ✓ Percutaneous Endoscopic Gastrostomy (PEG)
- ✓ Fecal Microbiota Transplantation (FMT)

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- Suite 2, 18 Limestone Street, Ipswich.
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My Gut Care is a group practice of Gastroenterologists. Please scan to see more details.