

Treatment

Antibiotics

- Neomycin
- Rifaximin
- Amoxicillin
- Tetracycline
- Flagyl
- Fluoroquinolone



In addition to antibiotics and other lifestyle changes it is important that the patient with Small Bowel Bacterial Overgrowth eat a well rounded diet without excess sugars or sweets included, as sugars and sweets can cause a build up of bad bacteria in the small intestine, which can cause:

- **Metabolic acidosis**
- **Lethargy**
- **Mimicking the “drunk” effect**
- **Fatigue and Disorientation**



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SBS Foundation

Educational Series

Small Bowel Bacterial Overgrowth



Short
Bowel
Syndrome
Foundation

*Empowering patients to live fuller
lives, creating a lifeline of hope.*

Introduction

Small Bowel Bacterial Overgrowth (SBBO) is characterized by nutrient malabsorption associated with an increased number of bacteria in the upper GI tract. Patients can be asymptomatic or have multiple symptoms including:

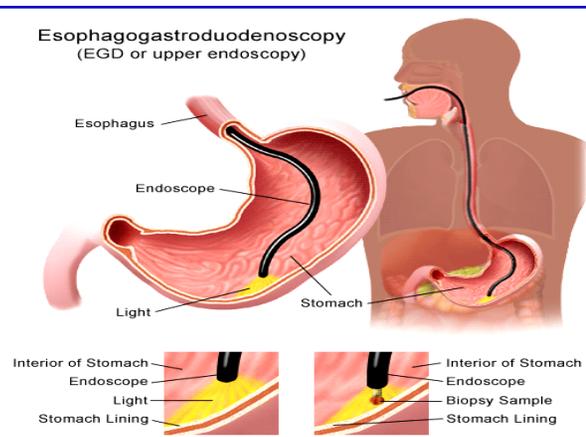
- Bloating
- Lethargy
- Abdominal Discomfort
- Watery Diarrhea
- Dyspepsia
- Weight Loss

Children may develop malnutrition and subsequently may have growth issues.

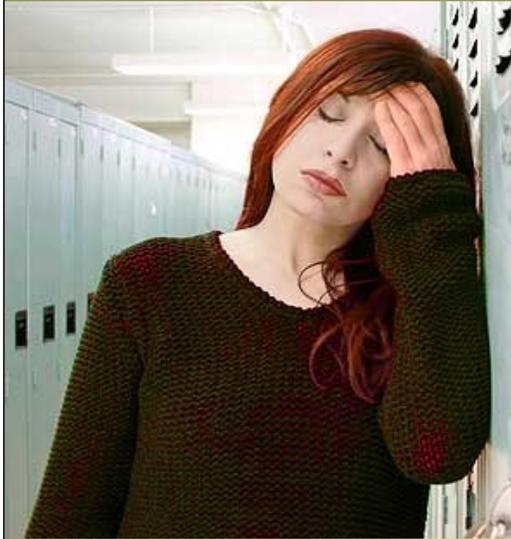
Diagnosis

The diagnosis of SBBO can be made by physicians in various ways, including:

1. Hydrogen Breath Test
2. Esophagogastroduodenoscopy with biopsies and cultures



Risk Factors and Causes



Some patients are predisposed to the development of bacterial overgrowth because of certain risk factors. These factors can be grouped into three categories:

1. Disordered motility or movement of the small bowel or anatomical changes that lead to stasis. The small bowel may have anatomical problems, such as out-pouching known as diverticula that can cause bacteria to accumulate.

2. Disorders in the immune system can cause bacterial overgrowth. Chronic pancreatitis or inflammation of the pancreas can cause bacterial overgrowth through mechanisms.

3. Conditions that cause more bacteria or non-nature bacteria to “overgrow” in the small bowel.

Abnormal connections between the bacteria-rich colon and the small bowel can increase the bacterial load in the small bowel. Patients with Crohn's disease or other diseases of the ileum may require surgery that removes the ileocecal valve connecting the small and large bowel; this leads to an increased reflux of bacteria into the small bowel.

