Food supplements, stress and gastrointestinal diseases

This is the author's manuscript

Original Citation:

Availability:
This version is available http://hdl.handle.net/2318/1644313 since 2018-11-02T15:56:55Z

Published version:
DOI:10.23736/S0031-0808.17.03309-2

Terms of use:
Open Access
Anyone can freely access the full text of works made available as "Open Access". Works made available under a Creative Commons license can be used according to the terms and conditions of said license. Use of all other works requires consent of the right holder (author or publisher) if not exempted from copyright protection by the applicable law.

(Article begins on next page)
Food supplements, stress and gastrointestinal diseases

Davide G. Ribaldone,¹ G.M.Saracco¹,²

¹Unit of Gastroenterology, Molinette Hospital, Turin, Italy; ²Department of Oncology, University of Turin, Italy

*Corresponding author: Davide Giuseppe Ribaldone, MD
Unit of Gastroenterology, Molinette-SGAS Hospital, Via Cavour 31, 10126 Turin, Italy
Phone. +39.011/6335208 E-mail: davrib_1998@yahoo.com

Key Words: Food supplement - Functional diseases - Functional dyspepsia - Irritable bowel syndrome

Conflicts of interest.—The authors certify that there is no conflict of interest with any financial organization regarding the material discussed in the manuscript.
Dear Editor,

We have read with interest the article by Allaert et al evaluating the benefit of a food supplement on psychological stress intensity in healthy volunteers. The authors found a significant reduction of stress and fatigue during the treatment and one month after its discontinuation.¹ We think that the results of this study could be extended beyond healthy subjects. In Gastroenterology, for example, psychological background is of relevance in several morbidities and food supplements could have a useful impact. In particular, functional dyspepsia (FD) is a common disorder characterized by upper abdominal discomfort or pain and meal-related symptoms, with a notable impact on quality of life of affected persons. The global prevalence of FD is estimated to be 10-30% worldwide and unemployment, divorce and smoking habits, but not H. pylori infection are associated with an increased risk.² The difficulty in managing dyspepsia lies in the multifactorial pathogenesis which makes both presentation and treatment benefit heterogeneous. As well-known, in the context of FD a crucial role is played by the psychic component, which affects the result of all the studies. In relation to this there is the need to study alternative treatments (pharmacological or not) to the routine administration of anti-secretive drugs. In a systematic review published in the year 2002, which analyzed the effectiveness of phytotherapeutic treatments in FD, Thompson Coon and Ernst concluded that 60-95% of the patients, in the included studies, showed a symptomatic improvement with this approach.³ This is confirmed in the recent years, not only by studies on patients with FD,⁴ but also with irritable bowel syndrome,⁵ the other frequent functional disease interesting the gastrointestinal tract.⁶ Thus, the use in these conditions of non-pharmacologic strategies could help not only health subjects but, in some contexts, also patients with functional diseases.

REFERENCES


