

Multidisciplinary approach more effective for gut disorders

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Patients with gastrointestinal disorders such as irritable bowel syndrome (IBS) and constipation have greater symptom relief and improved wellbeing when treated at multidisciplinary clinics, new research shows.

Researchers from the University of Melbourne and St Vincent's Hospital

have conducted a trial involving 144 [patients](#) to compare the effectiveness of a multidisciplinary clinic—involving gastroenterologists, dietitians, psychiatrists and physiotherapists—with usual gastroenterology specialist-only care.

These patients have poorly controlled symptoms such as bloating, pain and constipation and receive little relief from regular over-the-counter IBS medications.

Published in *The Lancet Gastroenterology and Hepatology*, researchers found 84 percent (82 of 98) of patients in the multidisciplinary care group achieved global symptom improvement. They reported moderate or substantial improvement in IBS symptoms such as stool frequency, pain and bloating. This compared with 57 percent (26 of 46) of patients in the standard care group.

Those in the multidisciplinary group also expressed greater improvement in psychological wellbeing, with a 40 percent decrease in depression, compared with a nine percent decrease for those in standard care.

Although the average cost per patient was significantly higher in the multidisciplinary-care group, researchers found patients benefited from treatment more, indicating that the overall long-term hospital cost would be less under this model.

Patients in the multidisciplinary group were also less likely to see their [general practitioner](#) for gut symptoms and were less likely to undergo tests outside of hospital during follow-up, suggesting broad cost savings.

Researchers found patients in the multidisciplinary clinic were less likely to take time off from work (26 percent compared to 37 percent of patients in standard care), further demonstrating the value of a more holistic treatment approach.

Researchers say the findings suggest that integrated multidisciplinary care for patients with a functional gastrointestinal disorder provides superior symptom relief and general wellbeing, and is more cost-effective, than traditional care.

University of Melbourne researcher and gastroenterologist at St Vincent's Hospital Dr. Chamara Basnayake said more than half of the patients within the trial had attempted dietary therapy previously, and 60 percent were classified as anxious, highlighting further need for an integrated approach to treatment.

"Functional [gastrointestinal disorders](#) are highly prevalent in the community with some patients experiencing extreme discomfort and illness for prolonged periods of time," Dr. Basnayake said.

"Our research shows the importance of bringing together and integrating specialists into one clinic to enable immediate frontline care and improve quality of life for patients."

Researchers say further studies evaluating the longer-term outcomes of multidisciplinary treatment is needed.

"Despite the high prevalence and health system burden, very few studies have ever evaluated the different models of care for patients with gastrointestinal disorders," Dr. Basnayake said.

More information: Basnayake et al. Standard gastroenterologist versus multidisciplinary treatment for functional gastrointestinal disorders (MANTRA): an open-label, single-centre, randomised controlled trial, *The Lancet Gastroenterology & Hepatology* (2020). [DOI: 10.1016/S2468-1253\(20\)30215-6](#)

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