



Microbiota Disease Treated with Intestinal Microbiota Transplant

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Abstract

A 45-year-old woman who starts with epigastric pain, frontal headache and thirst presented heartburn, burning throat, cut body. With numbness in face and part of the body breathe only by mouth. She has trouble breathing and put nasal drops for life. Nausea, all day milk and bread cause abdominal bloating and pain. Allergic to: Ampicillin benzocaine and penicillin. She has hypothyroidism and increased 88 micrograms of sodium Levothyroxine. T4 and anti-thyroglobulin increased by probable Hashimoto thyroiditis. Generalized edema when traveling to China from 5 years of age, up to 7 days without evacuation she takes natural laxatives, two a day and has improved. He has bled twice for hemorrhoids. Occasional palpitations 20 years with reflux allergic powder, pawpaw, melon and cats Hysterectomy for endometriosis. It is provided with symbiotic, medicines to speed up intestinal transit and inhibitory proton pump.

The Intestinal Microbiota Transplant carried out substantially improved the Anxiety, as well as the dermatological phenomenon, rhinitis, left ocular inflammation, otitis on the same side and constipation.

Keywords: Microbiota disease; Fecal Microbiota Transplantation (FMT); Intestinal Microbiota (IM); Intestinal Microbiota Transplantation (IMT); Microbiota; Microbiome

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Case Presentation

A 45 years old female suffered 3 weeks ago epigastric pain, frontal headache, and thirst she was taking quinfamide (100 mg), her headache was reduced. She has throat burning sensation, and “cut body” also developed facial numbness and body parts. She was prescribed Ciprofloxacin (500 mg 1 × 2 × 5 days) and amantadine, chlorferinamine and Paracetamol, also Guayaphasine without changes.

She had mouth respiration, and dyspnea. She used nasal drops for life, has all day long nauseas and body numbness. Milk and bread causes abdominal distension and pain. She is allergic Ampicillin, benzocaine and penicillin. She has hypothyroidism and was prescribed higher dose of Sodium Levothyroxine to 88 micrograms. This prescription raised T4.

When she travels to China developed small skin ulcers in her legs, and generalized edema. She had 5 years old when takes sennosides twice daily and improved her constipation. She had hemorrhoids bleeding twice. She used cream for the small skin ulcers without improvement (Figure 1).

She had occasional palpitation. Esophageal reflux for 20 years allergy to dust, papaya, melon and cats she had hysterectomy for endometriosis. Also she had multiple dermal inflammatory processes in her left leg, and right hip.

She was prescribed *Lactobacillus acidophilus*; *Lactobacillus casei*; *Lactobacillus rhamnosus*; *Lactobacillus plantarum*; *Bifidobacterium infantis*; *Streptococcus thermophilus*; inulin and Disaccharidescapsules1 before breakfast and dinner. Also she takes Pantoprazol, 40 mg, daily in fasting; domperidone tablets 10 milligrams 1 before meals. Her weigh is 66.5 kg. Tall 1.59 m. Pulse 85/min Breath 18/min Temp 36.5°C Abdominal Perimeter: 100 cm.

We changed symbiotic by *Bifidobacterium infantis* and induced allergy, it was suspended and change to *Lactobacillus acidophilus* one daily, she improved, but she developed burn sensation, and edema in eye, ear and nose of left side. In the USA she was prescribed with tetrahydrozoline. She



Figure 1: Dermatological injury before IMT.



Figure 2: Dermatological injury after IMT.

developed pruritus, laryngeal spasm, and tired when use stairs. Her TA was 110/80. Weight 69 kg. Size 1.59 m abdominal perimeter: 100 cm.

We add Lidocaine and Tribenoside Chlorhydrate for treatment of hemorrhoids.

Our diagnosis was:

Microbiota disease

- Anxiety Hamilton Scale 37 (45 years Old)
- Digestive Functional Disorder type
- Chronic Constipation (43 years old)
- Hemorrhoids (20 years old)
- Functional Digestive Bloating (25 years old)
- GERD (15 years old)
- Lactose Intolerance (25 years old)
- Hashimoto Thyroiditis (2 years old)
- Multi allergy Disease (45 years old)
- Atopic Skin (5 years old)
- Rhinitis, Eye Inflammation, Otitis Left Side (3 years old)
- Obesity First Grade (18 months)
- Generalized Edema when She Travels To China (2 years)

We treated her depositing 200 ml in jejunum, 200 ml in ascending colon, 200 ml in transverse colon and 500 ml in descending colon. We detected hiatal herniation, pyloritis, spastic colon, and Colon diverticular disease. We did Panendoscopy and colonoscopy that was a mixed transplantation. She presented pharyngitis. Indicates Paracetamol, tablets 500 milligrams 1 x 3. She has dark colored urine, and she was tired. Were tired Paracetamol because it was the only drug prescribed. Next day her urine and her urine examination were normal.

She lost 3 cm of abdominal diameter, her skin ulcerations were drying, and she was improve mental her complaints (Figure 2). Hamiltons scale reduced 14 points [1]. She said less abdominal pain after IMT was ceased in 24 h. Also pharyngeal spasm, with aphony she still has dry cough with minimal green expectoration. Her nocturnal headache, in a scale 0 to 10 was reducing with acetylsalicylic acid, caffeine and paracetamol. Her small skin eruption in her legs improved, some were pink. She diminished sennosides 2 to 1, and

her chronic constipation was improving although she cannot have evacuation her bowel. Her general condition is better. She is not tired, and her symptoms improved. She sleeps better. Her TA was 120/80 weight 69 kg. tall 1.59 m abdominal diameter 102 cm Age 45 y we prescribed Benzonatato, pearls 1 x 3; 4 days, Cetirizine 1 x 1; 4 days, *Lactobacillus acidophilus*, 1 x 1; 1month, Salbutamol sulphate, solution 1 inhalation by night 4 days. She was using Pantoprazole and Domperidona.

Her definitive diagnostics were:

Microbiota disease

- Anxiety Hamilton Scale 23
- Digestive Functional Disorder Type
- Chronic Constipation
- Hemorrhoids
- Functional Digestive Bloating
- Hiatal Hernia
- GERD
- Pyloritis
- Lactose Intolerance
- Hashimoto Thyroiditis
- Multi allergic Disease
- Atopic Skin
- Rhinitis, Left Oculitis and Otitis
- Left Side
- Obesity, First Grade
- Generalized Edema when She Travels To China

Discussion

The Microbiota disease is a significant problem, which occurred in millions people and fortunately could be improved with substitution of the diseased microbiota by healthy microbiota.

This disease is produced by disequilibrium of the Intestinal Microbiota and traduce in several diseases, as Anxiety, Intestinal inflammatory disease, Allergies, Irritable Colon Syndrome, Celiac Disease, Metabolic Syndrome, Asthma, some Cardiovascular Diseases and Obesity [2-5].



Figure 3: Dermatological injury Current.

Some authors signaled the Microbiota Disease as dysbiosis (dysbacteriosis) and we considered dysbiosis produce the so called Microbiota Disease, and in consequence this could be responsible of many digestive, dermatologic, psychiatric and inflammatory/immune processes also others [6-8].

At present there are several mechanisms able to generated microbiome alterations, among them caused microbiota's environmental disorders, diets, toxins, medications, infection due to viruses, stress and excesses or proteins or sugars in the daily diet [9-14].

But, how acts the Intestinal Microbiota in the protection, stimulation or development of different diseases?

It could be through alterations in the microbial composition in the gastrointestinal tract (dysbiosis) [15].

In the 29th World Congress of the International School of Neuropsychopharmacology (CISNOP) celebrated in Vancouver, Canada in June 2014, [16] a group of experts presented the Symposia "Intestinal Microbiota: relevance to psychiatric disorders" to review the last findings about how is the intestine function, and it was commented this: The microbiota can be have a significant role in the cerebral function, behavior and disease. Wen L et al. [17] manifest that the Intestinal Microbiota is able to impacts in the genesis of type I Diabetes.

Finally, the association between Intestinal Microbiota was postulated in the early 20th century [18,19].

Conclusion

The microbiota disease, in the present case, was diagnosed by Anxiety, and 11 comorbidities. The transplant of intestinal microbiota improved substantially the anxiety, skin alterations, rhinitis; left eye inflammation, skin problems, and, same side otitis. We considered the presence of Microbiota Disease when, in addition to one disease it can be all least 5 comorbidities, and the presence of anxiety as primary phenomenon or aggregated to 11 comorbidities.

A fact always presented in our patients is the anxiety, as first manifestation, which may be reduced, however, is always present. In the case studied although reduced 14 points in Hamilton's scale, it was present in the dermatologic, allergic and digestive compromise as the reduction. Even the transplant reduced but not eliminated much comorbidity in skin, allergy, and digestive manifestations.

The transplantation of Intestinal Microbiota, (mixed: jejunum and colon) was useful, manifest in next testimony: <https://1drv.ms/u/s!Am79tWjS0oJy6Cen1PbXLQDJc67V> (Figure 3).

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