

Webinar on Demand

Reflective Learning Material

Effect of *Bifidobacterium longum* 35624[®] on irritable bowel syndrome severity and quality of life. Results of the Floravie observational study



= 0.5 CPD learning hours

(British Society of Gastroenterology, 11th November 2021)

With Professor Jean-Marc Sabaté

Prof Jean-Marc Sabaté is a leading Gastroenterologist based at the Avicenna Hospital in Paris, France. Highly thought of in the fields of gastroenterology and irritable bowel syndrome, he has co-authored over 56 peer reviewed articles.

In this short webinar, Prof Sabaté takes us through his latest research looking at quality of life and symptom severity in patients with IBS, and what influence probiotics can have on these scores.

Learning Objectives:

1. Understand how symptom severity is measured in those with IBS according to Rome IV criteria
2. Understand the impact of *Bifidobacterium longum* 35624[®] on quality of life in those with IBS
3. Understand how stool transit is changed with the introduction and continued use of probiotics
4. Understand the role of probiotics as potential therapeutic strategy for improving quality of life and symptom severity in patients with IBS

Complete this reflective learning guide to support your learning objectives. This can be filed in your CPD portfolio as evidence of your learning.

Reflective Learning Questions:

1. The IBS-SSS is the most frequently used severity measure for evaluating IBS severity, evaluating 5 items related to IBS symptoms. Taking all 5 items into account, reflect on the impact IBS may have had on your recent patients, and their daily lives.
- 2.
3. The study looks at both quality of life and symptom severity of those with IBS and found a significant correlation between the two. Reflecting on the results from the clinical trial:
 - a. Briefly describe the evolution of symptom severity categories
 - b. What effects were observed on quality of life scores?
4. Patients with IBS are categorised into 4 sub-groups according to stool patterns set out by the Bristol stool scale; IBS-C, IBS-D, IBS-M, IBS-U. Following the introduction and continued use of probiotics, what trend was identified in all subgroups?
5. Reflect on the clinical evidence outlined in the observational study presented by Prof Sabaté. Thinking of patients who have presented to you with IBS in the last year, how do the results presented compare to other methods or treatments you may recommend for patients with IBS?