

Fecal Microbiota Transplantation: Successful Pioneering Experience in the Philippines for the Treatment of Severe Complicated *Clostridium difficile* Infection (CDI)

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Abstract

Significance: *Clostridium difficile* has emerged as a major cause of antibiotic-associated diarrhea and its incidence has been observed to climb over the last two decades¹. With the increasing numbers of recurrent or refractory CDI, the use of fecal microbiota transplantation (FMT) has gained popularity and has demonstrated an average success rate of 92% in a recent systematic review and meta-analysis³. Despite its simplicity and treatment success rates, local access and availability of FMT protocols were only established after this pioneering experience in the Philippines.

Clinical Presentation: This case is of a 71/F with 8 weeks of diarrhea and abdominal pain and was diagnosed with severe CDI with pseudomembranous colitis. Despite extended therapy using Metronidazole and Vancomycin, she remained hospitalized and continued to have abdominal pains, fever and bloody diarrhea.

Management: After extensive screening, a suitable donor was identified and the first FMT in the Philippines was performed. The fecal microbiota preparation was delivered via colonoscopy to the terminal ileum and cecum. The patient had immediate and complete cessation of diarrhea and eventually discharged improved. Fifty-one days after FMT, repeat colonoscopy showed resolution of the colitis.

Recommendation: The observation made from our case suggests that FMT is a safe and effective treatment intervention for patients with severe CDI and should be considered earlier in the treatment algorithm.

Keywords: Fecal Microbiota Transplant, FMT, severe CDI treatment