



Journal of

Cystic Fibrosis

The Official Journal of the European Cystic Fibrosis Society

Title:

Distal Intestinal Obstruction Syndrome resolved by dissolution with Coca-Cola[®] via colonoscopy in a cystic fibrosis patient

Authors:

Carlos Ferre-Aracil¹, Mariano González-Haba¹, Beatriz Tormo-Lanseros¹, Luis Giménez-Alvira², Manuel Jiménez-Garrido ²

Affiliations:

¹ Gastroenterology and Hepatology Unit. Hospital Universitario Puerta de Hierro Majadahonda. Madrid. Spain.

² Digestive and General Surgery Unit. Hospital Universitario Puerta de Hierro Majadahonda. Madrid. Spain.

What was your research question?

Are there novel non-surgical options to management of patients with cystic fibrosis who suffer from Distal Intestinal Obstruction Syndrome (DIOS)?

Why is this important?

DIOS is a frequent complication which may appear in adult cystic fibrosis patients. It consists of a partial or total obstruction of the small bowel due to the formation of hard stool which cannot be evacuated. Some patients do not respond to conservative therapy with laxatives and may require aggressive surgical interventions in order to resolve it.

What did you do?

In this paper we present the case of a 37 years old Spanish cystic fibrosis patient with DIOS. After trying non-invasive management with laxatives (which was not effective), we wanted to try a new approach. We performed a colonoscopy in order to apply a dissolutive therapy directly over the hardened stool in the bowel. We decided to try diet Coca-Cola[®] as a stool softener, as it has been used previously in digestive endoscopy in other similar conditions.

What did you find?

We found that, with only one therapeutic colonoscopy, this approach was rapidly effective in resolving DIOS. The patient responded well, and DIOS did not reappear after two months of follow-up.

Cystic Fibrosis Research News

cfresearchnews@gmail.com





Cystic Fibrosis Research News

What does this mean and reasons for caution?

Dissolutive therapy with Coca-Cola[®] via colonoscopy could be considered in cystic fibrosis patients with DIOS. However, this is the experience of a single case and, therefore, the scientific evidence is very weak.

What's next?

In order to have more evidence about the safety and effectiveness of this approach, future well designed studies with more patients are warranted.

Original manuscript citation in PubMed

https://pubmed.ncbi.nlm.nih.gov/32446590/

Cystic Fibrosis Research News

cfresearchnews@gmail.com