

Functional gastrointestinal disorders

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DESCRIPTION

INTRODUCTION

Introduction

Functional Gastro Intestinal Disease (FGID) is common in children and has high direct and indirect social costs. Partially Hydrolyzed Guar Gum (PHGG) is a water soluble natural dietary fiber derived from guar gum. It has been proposed as an adjunct therapy for pediatric TGIFs, especially for chronic functional constipation and irritable bowel syndrome.

Fields involved

This article uses four clinical cases to illustrate the application of PHGG fiber as the sole supplement or component of the formula in orally and tube-fed infants suffering from malnutrition due to GFR, regardless of the presence or absence of special diseases such as neurological. The formula is a nutritionally complete formula based on serum peptides, containing PHGG as a source of soluble dietary fiber. It is provided under medical supervision and after full consideration of all feeding options.

Expert opinion

The implementation of appropriate eating behaviors for age and possible comorbidities is a necessary condition for managing the treatment of GFR. The use of PHGG supplements or complete nutritional formulas containing PHGG as a source of soluble dietary fiber can help control pediatric FGID. In recent years, the systemic treatment of unresectable advanced hepatocellular carcinoma (HCC) has undergone an evolution. In March 2020, the FDA approved the combination of nivolumab and ipilimumab for the treatment of patients with advanced HCC who had previously been treated with sorafenib. This is based on the results of the Phase I / II Cohort trial 4 check mate 040, which showed a promising overall response rate and encouraged overall survival and controlled safety.

Although the incidence and mortality of colorectal cancer (CRC) among the elderly has decreased, the incidence and mortality of adults under 50 years of age are increasing in the United States and throughout the world. In response to robust epidemiological evidence and complex models, the American Cancer Society (ACS) recommends screening for CRC in adults 45 years of age and older. Understanding the factors associated with the increased incidence of adults under the age of 50 can help identify the adults who may be at higher risk covers

Areas

In this review, we describe recent literature and discuss possible explanations for increased CRC in young adults, including obesity and other recognized risk factors for CRC, and late diagnosis in symptomatic patients (<50 years of age). The current and future state of the field.

Expert opinion: Currently there is little data on risk factors for CRC in asymptomatic young people at medium risk. With the potential endorsement of 45-year screening tests by the US Preventive Services Task Force, there will be more data on the clinical and molecular risk factors associated with CRC in young adults. Appendectomy remains the gold standard for the treatment of simple and complex appendicitis. However, the worm-like appendix can play an important role in the immune system (secondary immune function) and maintain a normal microbiome repository for the body. The purpose of this study is to summarize the long-term effects of appendectomy and to discuss whether appendectomy is appropriate for all patients with appendicitis.

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