

# Probiotics & Gut Symptom Treatment

Evidence for probiotics is mixed, likely due to differences in doses and strains studied. Furthermore, etiology and pathology of IBS is heterogenous, so response will vary as well. For both IBS and SIBO, soil-based organisms seem to be the most widely tolerated.

## BEST PROBIOTICS BASED ON SYMPTOMS

Best probiotics for constipation	Best probiotics for loose stools / diarrhea
Soil-based organisms	Soil-based organisms
Transient commensals	Transient commensals
E. coli Nissle	Saccharomyces boulardii
Lactobacillus plantarum	VSL#3
Bifidobacteria infantis	Elixa

## GENERAL REMEDIES FOR CONSTIPATION

Intervention	Notes
Magnesium glycinate	200–600 mg/d (caution with higher doses over long term)
Magnesium citrate (e.g., Natural Calm)	1–2 tsp before bed; can also help with sleep
Soluble fiber	Glucomannan, PHGG, citrus pectin, acacia (as directed by manufacturer; start slowly & build up)
Probiotics	L. plantarum, B. infantis, SBOs, kefir, fermented foods (start slowly and build up)
Vitamin/electrolyte blend (e.g., Ageless Hydro-C)	Vitamin C, Mg, K, Ca (as directed on website/bottle)
Prokinetics	Iberogast, MotilPro, LDN, low-dose erythromycin
Ozonated magnesium	i.e., Mag 07 (as directed; avoid long-term use)

## INTERVENTIONS FOR LOOSE STOOL/DIARRHEA

Intervention	Notes
Soluble fiber	Glucomannan, PHGG, citrus pectin, acacia (higher doses may be required)
Probiotics	SBOs, transient commensals, <i>S. boulardii</i> , VSL#3, Elixia (as directed by manufacturer)
GAPS diet	See IBD section for more info
Rifaximin	May be taken repeatedly if necessary (for IBS-D, start with 10-14 day course)