

Food Exclusion Based on IgG Antibodies Alleviates Symptoms in Ulcerative Colitis: A Prospective Study.

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Abstract

BACKGROUND: Most patients with ulcerative colitis (UC) rely predominantly on medication for disease control. Diet interventions can reduce pharmaceutical expenditures and prolong remission. We designed a prospective study to evaluate whether an immunoglobulin G (**IgG**)-guided exclusion diet would improve symptoms and quality of life (QoL) in patients with UC.

METHODS: The 6-month diet intervention included 97 patients with UC, who were randomly divided into an intervention group (n = 49) and a control (n = 48) group. Individual diet plans were created for the intervention group according to **IgG** titers; the control group ate a healthy diet as normal. Observational indices included disease activity, extraintestinal manifestations, nutritional status, and QoL. Relationships between **food-specific IgG** antibodies and these indices were also analyzed.

RESULTS: At baseline, there were no significant differences between the groups. **Food-specific IgG** antibodies were detected in 70.10% of participants. After intervention, the Mayo score was significantly lower in the intervention group than in the control group (2.41 ± 0.89 vs 3.52 ± 1.15 , $P < 0.05$). The number of patients with extraintestinal manifestations decreased from 7 to 2 in the intervention group and from 6 to 5 in the control group. As for nutritive indices, the intervention group had higher mean body mass index and albumin than the control group (23.88 ± 3.31 vs 21.50 ± 6.24 kg/m², respectively, $P < 0.05$; 48.05 ± 6.39 vs 45.72 ± 5.48 g/L, respectively, $P < 0.05$), whereas prealbumin and transferrin were not significantly different between the groups. QoL improved after **food** exclusion ($P < 0.05$).

CONCLUSIONS: An **IgG**-guided exclusion diet ameliorated UC symptoms and improved QoL. Interactions between **IgG**-based **food intolerance** and UC warrant further study.

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