

CHRONIC ASPECIFIC INFLAMMATORY BOWEL DISEASE IN AUTISM: BEHAVIORAL EFFECT OF ITS TREATMENT

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Gastrointestinal symptoms (GS) have frequently been overlooked or attributed to the behavioural and sensory dysfunction associated with autism. A chronic inflammatory bowel disease characterized by chronic aspecific ileo-colonic inflammation and increased gut permeability (AIBD) has been reported by independent studies in autistic pts. We evaluate the GS and behavioural influence of gastrointestinal therapy in autistic pts with AIBD. Among 134 consecutive autistic pts referred to our centre that underwent gastroscopy/colonoscopy for severe GS (abdominal pain/constipation/diarrhoea), 126 showed an AIBD. A gastrointestinal pharmacological and dietetic therapy was then prescribed according to the histological score and site of the inflammation. After the treatment, 106 out of 134 pts (80%) with severe constipation or diarrhoea showed normal stool movements and in 100 out of 134 pts (75%) an evident clinical resolution of abdominal pain. In a selected group of 36 pts with AIBD, two standardised scales for autism (CARS and ECAR-T) were used to blindly evaluate the behavioural follow-up. The total CARS/ECARS score showed a statistically significant global improvement in all the pts evaluated ($p=0.003$ and $p=0.005$ respectively) after 1 year. When selected symptoms were compared before and after the treatment a significant reduction of agitation ($p=0.004$), etero-aggressivity ($p=0.004$), self-aggressivity ($p=0.005$) and improvement of attention ($p=0.005$) and imitation ($p=0.01$) were reported. These preliminary data showed not only a beneficial effect of the combination of drug and dietetic therapy on GS in autistic pts with AIBD but also the crucial role of the gut-brain axis on the behavioural symptoms in autistic pts with GS.