

# The Clinical Impact of Brain-Gut Psychotherapy on Psychological Symptoms for Patients with Complex Gastrointestinal Disorders: Outcomes in a Real-World Practice Setting

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## Introduction

- Brain-gut psychotherapies, such as cognitive behavioral therapy (CBT) are increasingly recognized as important aspects of gastroenterology care.
- However, there are few studies conducted in real-world GI community practices.

## Study Aim

- Describe clinical characteristics and outcomes of patients who underwent brain-gut psychotherapy in an ambulatory GI clinic.

## Methods

- Retrospective demographic and patient-related characteristics for a subset of adult patients who completed treatment in a psychology clinic embedded into an outpatient GI clinic in a large, metropolitan community practice in Charlotte, NC.
  - $N=14$
- Demographics were: Age, Gender, GI condition

## Therapeutic Approach

- A GI-focused CBT approach was utilized for all patients.
- For most patients, therapy was short-term (e.g., 4-7 sessions), but therapy timeframes varied.

## Assessment Measurements

Measure	Purpose
<b>Phq-9</b> Range: 0-27, higher scores = more severe depression	Screening tool for depression
<b>GAD-7</b> Range: 0-21, higher scores = more severe anxiety	Screening tool for generalized anxiety
<b>Phq-15</b> Range: 0-30, higher scores = greater levels of somatization	Screening tool for somatization

## Demographics and Clinical Characteristics

- Patients ( $N=14$ ) were primarily female (88%) with a diverse age-range (19-89 years)
- Patients were referred for a range of complex gastrointestinal conditions'

<ul style="list-style-type: none"> <li>Abdominal pain</li> <li>Diarrhea</li> <li>Nausea</li> <li>Globus sensation</li> </ul>	<ul style="list-style-type: none"> <li>Irritable bowel syndrome</li> <li>Functional dyspepsia</li> <li>Dyssnergic defecation</li> <li>Ulcerative colitis</li> </ul>
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## Results

Measure	Baseline Number of patients ( $n$ )	Follow-up Number of patients ( $n$ )	Patient Change from Baseline to Follow-up
<b>Phq-9</b>	None to Minimal $n=5$ Mild $n=5$ Moderate $n=3$ Severe $n=1$	None to Minimal $n=7$ Mild $n=6$ Moderate $n=0$ Severe $n=1$	All patients depressive symptoms improved or remained the same
<b>GAD-7</b>	None to Minimal $n=3$ Mild $n=6$ Moderate $n=3$ Severe $n=2$	None to Minimal $n=8$ Mild $n=4$ Moderate $n=1$ Severe $n=1$	Most patients anxiety symptoms improved or remained the same  Two patients worsened, from minimal at baseline to mild at follow-up
<b>Phq-15</b>	None to Minimal $n=0$ Mild $n=2$ Moderate $n=5$ Severe $n=7$	None to Minimal $n=3$ Mild $n=3$ Moderate $n=5$ Severe $n=3$	All patients' somatization symptoms improved or remained the same

## Discussion

- Brain-gut psychotherapy, particularly CBT, improved anxiety, depressive, and somatization symptoms in real-world practice.
- More effectiveness studies are warranted to confirm these findings.