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DIETARY FIBER'S BENEFIT FOR GALLSTONE DISEASE PREVENTION DURING RAPID WEIGHT LOSS IN OBESE PATIENTS

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Dietary fiber is considered as a key component in healthy diet. Different definitions of dietary fiber are available, but according to all existing definitions they are considered as a group of carbohydrate polymers and oligomers that escape digestion in the small intestine and pass into the large bowel, where they are partially or completely fermented by the colonic microflora [8]. The interest to this nutrient particularly arose in early 1970s, after the dietary fiber hypothesis was launched. British physician Denis Burkitt linked development of Western diseases with low intake of dietary fiber [13]. Conducted studies showed obvious linkage between reduction in the occurrence of conditions like constipation, diverticular disease, hiatal hernia, appendicitis, varicose veins, hemorrhoids, gallstones, obesity, cancer of the large bowel, coronary heart disease and diabetes with the addition of dietary fiber to the diet [8,13]. Recommendations of dietary fiber intake in Europe range from 25 g/day to over 40 g/day based on the AOAC International Official Method 985.29 [10], which is two or three folds higher of average fiber intake among the population of Western countries.

Generous intake of dietary fiber enhances quality of life and improves physical and psychological health [14]. Wheat bran is most concentrated source of insoluble fiber in the European diet. It contains 43g fiber/100g, while rice bran contains 21g fiber/100g and oat bran - just 15g fiber/100g [11].

Gallbladder disease is one of the most common conditions among gastrointestinal disorders and is manifested by the presence of gallstones, detected with an ultrasound investigation [9]. Rapid weight loss using very low calorie diet (defined as <800kcal per day) markedly increases the risk of gallstone formation [7]. During protein rich very low calorie diet gallstone formation is facilitated by the more concentrated bile and its reduced flow during this type of diet. Preventive action of food, rich with dietary fiber, against gallstones is well evidenced [5,11]. At the same time diets that are high in fiber are typically low in fat and energy intake, both of which are helpful for reduction of body weight [15].

We developed dietary fiber rich low-calorie food products (bread, muesli, combination with minced meat) under the trade name "Margi" [1-3]. Advantage of consumption of these products for prevention of formation of the gallbladder stones was evidenced during investigation among patients with viral hepatitis B [4].

The aim of present study was to compare the effects of very low calorie diets – protein rich and dietary fiber rich food based – on gallstones formation during rapid weight loss.

Materials and methods. Patients were recruited from outpatients of the Department of Internal Medicine. The study involved 68 patients aged from 25 to 55 years, including 50 women (73.5%) and 18 men (26.5%). The main inclusion criterions were obesity and absence of gallstones in the gallbladder. The body weight index in all cases exceeding normal value (25 kg/m^2) and equaled to $35 \pm 4.7 \text{ kg/m}^2$. Before involvement in the trial ultrasound investigation of the gallbladder was provided. The amount of biliary sludge in the patient's gallbladder lumen mostly did not exceed 1/5–1/4. Only in 5 cases, gallbladder lumen ultrasonography detected the biliary sludge in excess of 1/4. Two weeks prior to the commencement of the trial these patients underwent sanitation of the biliary tract, with a complete evacuation of the contents.

12 (17.6%) patients had past medical history significant for acute viral hepatitis. Most of them failed to indicate which hepatitis (A, B, C) they had suffered. Out of the total number of patients, 14 (20.6%) patients were found to have IgG anti-HBc (IgG antibody subclass to hepatitis B core antigen) in the blood serum. None of them were found to have HbsAg (surface antigen to the hepatitis B) and antibodies. Hepatomegaly was observable in 5 cases (7.4%). No disturbances of liver function tests were detected.

According to past history, 5 patients had stomach and duodenum disorders: four patients had gastritis, one – peptic ulcer. Endoscopy was carried out in all five cases and confirmed the past history data, but all cases demonstrated remission, both clinically and with endoscopy.

None of the patients suffered with intestinal diseases being clinically manifested with prolonged diarrhea. Prior to the trial 25 patients (36.8%) complained on constipation. None of the patients under observation had chronic diseases requiring chemotherapy or keeping of the diet for the reasons other than reduction of weight.

All patients were divided into two groups, each composed of 34 patients. For weight correction purposes the patients in first group were kept during 5 weeks on a 520-800 kcal diet of "Margi" food products: bread, muesli, dishes prepared from minced meat. The food products under trade name "Margi" contain wheat bran, processed under the

Table 1. Changes of body weight during the investigation

Patients	Reduction of initial weight after	
	Three weeks of diet (body weight in kg)	Five weeks of diet (body weight in kg)
First group	7,5±1,6	10,9±1,5
Second group	7,8±1,2	11,2±1,1

$p > 0,05$ in comparison with first group

Table 2. Changes of body weight and biliary sludge during the investigation

Patients	Increase of biliary sludge after		Totally (%)
	Three weeks of diet (%)	Five weeks of diet (%)	
First group	8,8	0	8,8
Second group	20,6	5,9	26,5*

* $p < 0,05$ in comparison with first group

original technology proposed by authors of the article [1]. Diversity of developed products allowed keep the diet using only these products. The second group patients were kept for 5 weeks on a protein rich diet of the same calorie content.

Changes in the gall-bladder wall and content were assessed by sonography and body weight, as well as body mass index were measured before starting the diet, after three weeks from the commencement of the diet and upon its completion.

Results and their discussion. Before starting the diet body weight of the patients in first group was 108,2±16,2kg, while that in the second group - 110,5±18,8kg. Three weeks after the commencement of the diet, the body weight reduced by 7,5±1,6kg and 7,8±1,2kg accordingly in first and second groups. The measurement of the body weight after completion of the diet revealed decrease by another 3,8±1,2kg in the first group and by 4,1±0,7kg in the second group. The total weight reduction during five weeks in the group consuming dietary fiber rich food was on average 10,9±1,8kg, which does not significantly differ from the weight reduction in the patients getting protein rich diet.

An increase in the amount of biliary sludge was reliably higher in the second group of patients (26.5%), as compared with the patients being kept on the dietary fiber-rich, low-calorie food (8.8%) (Table 1). Sonography conducted after three weeks revealed a growth in the amount of biliary sludge in 3 cases (8.8%) in the first group and in 7 cases (20.6%) in the second group. The patients with increased amount of biliary sludge were excluded from the investigation. Following upon the diet's completion, two more patients (5.9%) in the second group were found to increase the biliary sludge amount.

This study has demonstrated that dietary intervention based on fiber rich food didn't lead to worsening of digestive health and even conferred significant improvements in

constipation, bloating and digestive discomfort. On the other hand, by the end of the trial, complaints for digestive feelings were observed in 7 (20.6%) patients of the second group.

Weight loss is often one of the first recommendations made to obese patients for prevention of cardiovascular diseases (CVD) and diabetes mellitus (DM). However, rapid reduction of weight often is related with gallstones formation and deterioration of digestive health. Our results indicate successful and nearly equal reduction of body weight by means of dietary fiber rich products under trade mark "Margi" and protein rich diet, but high fiber consumption showed statistically significant benefits for prevention of gallstones formation and improvement of digestive health at all. According to existing scientific data dietary soluble and insoluble fiber inhibits cholesterol stone formation by reducing the biliary cholesterol saturation index [9]. The beneficial effect of fiber on digestive health and constipation is well evidenced. Fiber effect on laxation and regularity is related primarily to the ability of fiber to increase stool weight. The increased stool weight is due to the physical presence of the fiber, water held by the fiber, and increased bacterial mass from fermentation. Larger and softer stools increase the ease of defecation and reduce transit time through the intestinal tract, which may help to prevent or relieve constipation, the frequent concomitant state of obesity [10]. Reduction of hunger and greater satiation are also significant advantages of dietary fiber rich food for successful management of obesity.

Conclusion. The study showed that, in the respect to weight loss, diets based on fiber rich and protein rich food are equal, but fiber rich diet has considerable privilege in prevention of gallstone disease. Our findings support the presence of known association between increased dietary fiber consumption and reduction of gallstone formation [3,4,9]. Obesity and rapid weight loss are risk factors for development of gallstones. Tak-

ing in an account the beneficial effect of dietary fiber, the food rich with this nutrient, particularly low-calorie fiber rich food "Margi", can be recommended for rapid weight loss in obese patients.

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SUMMARY

DIETARY FIBER'S BENEFIT FOR GALLSTONE DISEASE PREVENTION DURING RAPID WEIGHT LOSS IN OBESE PATIENTS

Sulaberidze G., Okujava M., Liluashvili K., Tughushi M., Bezarashvili S.

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The aim of present study was to compare the effects of very low calorie diets – protein rich and dietary fiber rich food based – on gallstones formation during rapid weight loss.

68 patients were involved into the study. The body weight index in all cases exceeding normal value and equaled to $35 \pm 4,7 \text{ kg/m}^2$. For weight correction purposes during 5 weeks the patients in first group were kept on a 520-800 kcal diet of "Margi" food products, prepared according our technology, and in the second group on a protein rich diet of the same calorie content. The body weight and changes in the gall-bladder wall and content were assessed by sonography before starting the diet, after three weeks from the commencement of the diet and upon its completion.

The measurement of the body weight after completion of the 5 week diet revealed decrease by $10.9 \pm 1,5 \text{ kg}$ in the first group and by $11,2 \pm 1,1 \text{ kg}$ in the second group. Sonography disclosed growth in the amount of biliary sludge in 3 cases in the first group and in 9 cases in the second group. The statistical analyses of results indicate successful and nearly equal reduction of body weight by means of dietary fiber rich and protein rich diet, but high fiber consumption showed statistically significant benefits for prevention of biliary slug accumulation.

The study showed that, in the respect to weight loss, diets based on fiber rich and protein rich food are equal, but fiber rich diet has considerable privilege in prevention of gallstone disease. Our findings support the presence of known association between increased dietary fiber consumption and reduction of gallstone formation. Obesity and rapid weight loss are risk factors for development of gallstones. Taking in an account the beneficial effect of dietary fiber, the food rich with this nutrient, particularly low-calorie fiber rich food "Margi", can be recommended for rapid weight loss in obese patients.

Keywords: fiber rich food, protein rich food, gallstone disease, weight loss.

РЕЗЮМЕ

ЗНАЧЕНИЕ РАСТИТЕЛЬНЫХ ВОЛОКН ДЛЯ ПРЕВЕНЦИИ ЖЕЛЧНОКАМЕННОЙ БОЛЕЗНИ ПРИ БЫСТРОМ СНИЖЕНИИ ВЕСА У БОЛЬНЫХ С ОЖИРЕНИЕМ

Сулаберидзе Г.Т., Окуджава М.В., Лилуашвили К.Н., Тугуши М.Г., Безарашвили С.И.

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Целью исследования явилась сравнительная оценка двух диет низкой калорийности: диета, содержащая продукты фирмы «Марги», и диеты, богатой белками, с точки зрения их влияния на снижение веса и образование желчных камней.

Под наблюдением находились 68 пациентов. Индекс массы тела исследуемых пациентов составлял $35 \pm 4,7 \text{ кг/м}^2$. Пациенты, с целью коррекции веса, на протяжении пяти недель находились на диете 520-800 ккал. Пациенты первой группы ($n=34$) принимали богатые растительными волокнами продукты фирмы «Марги» по оригинальной технологии разработанной сотрудниками Тбилисского государственного медицинского университета (патент №93314, "Сакпатент" 25/01-2012). Пациенты второй группы ($n=34$) находились на богатой белками диете. До начала диеты, три недели спустя и по окончании диеты пациентов взвешивали и проводили ультразвукографическое исследование желчного пузыря.

После 5-недельной диеты снижение веса пациентов первой группы составило $10,9 \pm 1,5 \text{ кг}$, второй группы - $11,2 \pm 1,1 \text{ кг}$. При ультрасонографическом исследовании увеличение осадка в желчном пузыре отмечалось у трёх больных первой и у девяти второй групп. Статистический анализ данных показал что различие в снижении веса при применении богатой растительными волокнами пищи и диеты богатой белками незначительно, однако риск образования желчных камней статистически значительно выше при применении диеты богатой белками.

На основании полученных данных следует заключить, что обе диеты по эффективности снижения веса имеют одинаковые показатели, однако риск образования камней в желчном пузыре более высокий в случае белковой диеты. Ожирение и быстрое снижение веса являются риск-факторами желчнокаменной болезни. Исходя из вышеизложенного, авторы рекомендуют пищу, богатую растительными волокнами, в частности, продукты «Марги» для быстрого снижения веса.

რეზიუმე

მცენარეული ბოჭკოს მნიშვნელობა ნაღვლკენჭოვანი დაავადების პრევენციისათვის
წონის სწრაფი კლების დროს ჭარბი წონის მქონე პაციენტებში

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თბილისის სახელმწიფო სამედიცინო უნივერსიტეტი, შინაგან სნეულებათა დეპარტამენტი,
სამედიცინო ფარმაკოლოგიისა და ფარმაკოთერაპიის დეპარტამენტი, საქართველო

კვლევის მიზანს წარმოადგენდა ძალიან დაბალი კალორიული ღირებულების მქონე ორი ტიპის დიეტის - ცილებით მდიდარი და მცენარეული ბოჭკოთი მდიდარი დიეტების - ეფექტურობის შედარება როგორც წონის კლებაზე, ასევე, ნაღვლის ბუშტში კენჭების წარმოქმნაზე.

კვლევაში ჩართული იყო 68 პაციენტი, რომელთა სხეულის მასის ინდექსი შეადგენდა $35 \pm 4,7 \text{ კგ/მ}^2$. პაციენტები 5 კვირის განმავლობაში იმყოფებოდნენ 520-800 კკალ კვებითი ღირებულების მქონე დიეტაზე. პირველ ჯგუფში შემავალი 34 პაციენტი იღებდა ორიგინალური ტექნოლოგიით დამზადებულ, მცენარეული ბოჭკოთი მდიდარ "მარგის"

საფირმო ნიშნის მქონე პროდუქტებს, (პატენტი 93314, „საქპატენტი“, 25/01-2012), ხოლო მეორე ჯგუფის 34 პაციენტი იღებდა ცილების მაღალი შემცველობის მქონე საკვებს. ყველა შემთხვევაში კვლევის დაწყებამდე, დიეტის დაწყებიდან სამი კვირის შემდეგ და დიეტის დასრულებისას ხდებოდა სხეულის წონის განსაზღვრა და ნაღვლის ბუშტის ულტრასონოგრაფიული გამოკვლევა.

ხუთი კვირის შემდეგ პირველი და მეორე ჯგუფის პაციენტების წონა შემცირდა შესაბამისად $10,9 \pm 1,5$ და $11,2 \pm 1,1 \text{ კგ}$ -ით. ულტრასონოგრაფიული გამოკვლევის შედეგად ნაღვლის ბუშტის სანათურში ნალექის რაოდენობამ პირველ ჯგუფში მოიმატა

3 შემთხვევაში, ხოლო მეორე ჯგუფში - 9 შემთხვევაში. მიღებული შედეგების სტატისტიკურმა ანალიზმა გამოავლინა, რომ წონაში კლების თვალსაზრისით, ჯგუფებს შორის განსხვავება არ აღინიშნა, რაც შეიძლება ნაღვლის ბუშტის სანათურში ნალექის წარმოქმნას სარწმუნოდ უფრო ხშირი იყო პაციენტებში, რომლებიც ცილით მდიდარ დიეტაზე იმყოფებოდნენ.

მიღებული შედეგები მიუთითებენ, რომ წონის შემცირების თვალსაზრისით მცენარეული ბოჭკოთი მდიდარი დიეტა არ ჩამოუვარდება

ცილოვან დიეტას და გააჩნია მნიშვნელოვანი უპირატესობა ნაღვლის ბუშტში კენჭების ფორმირების შემცირების მხრივ. ეს შედეგები ეხმიანება ლიტერატურის მონაცემებს ნაღვლკენჭოვანი დაავადების პრევენციისათვის მცენარეული ბოჭკოების სარგებლიანობის თაობაზე. ვინაიდან სიმსუქნე და წონის სწრაფი კლება ნაღვლის ბუშტში კენჭების წარმოქმნის რისკ-ფაქტორებია, ავტორები სწრაფი კლებით, სათვის რეკომენდაციას უწევენ მცენარეული ბოჭკოთი მდიდარ საკვებს, კერძოდ კი - "მარგის" პროდუქტებს.

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