Reply to Solari et al

To the Editor—We thank Solari et al for their cautionary tale regarding a fatality that occurred after fecal microbiota transplant (FMT) [1]. Although unfortunate, this case highlights the meticulous care that must be exercised when performing FMT. Mechanical complications are well recognized as potential problems in FMT, as with endoscopy. When practiced...
according to established guidelines [2], which include verification of the nasogastric tube tip placement prior to instillation of the stool, FMT has proven to be safe and effective.

In this case, there is no clear evidence that directly faults the FMT instillation. The rapid deterioration that occurred 48 hours after the FMT instillation argues that a spontaneous leak occurred in the intestinal tract that resulted in fecal contamination of the peritoneal cavity, even though no leak was detected at the time of the emergent surgery. Although FMT is not a new procedure, it is now being performed on a scale not seen previously. Indeed, >3000 FMTs have been performed worldwide to date with no proven reported consequences beyond inadvertent transmission of norovirus to 2 recipients [3]. However, as with any widely practiced invasive procedure, it should be expected that there may be future reports of putative complications, and we encourage everyone who performs FMT to report their outcomes to accurately characterize the safety and efficacy of this potentially life-saving procedure. Currently, there are discussions among specialty societies and the National Institutes of Health to create a national registry for donors and recipients to assist in this regard.

Note

Potential conflicts of interest. All authors: No reported conflicts.

All authors have submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest. Conflicts that the editors consider relevant to the content of the manuscript have been disclosed.

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References

