

Gastritis linked to metformin-related GI side effects in T2DM

5 June 2015



versus 0.06 ($P = 0.024$), and 1.08 versus 1.71 ($P = 0.028$), respectively, for non-gastritis versus gastritis subjects, over four weeks. The mean final metformin doses were 706.24 and 1,101.56 mg for gastritis and non-gastritis subjects, respectively ($P = 0.001$).

"Our data show for the first time that asymptomatic [chronic gastritis](#) predisposes to metformin-related gastrointestinal side effects," the authors write.

"However, the molecular mechanisms are still unclear and merit further investigation."

More information: [Abstract](#)
[Full Text \(subscription or payment may be required\)](#)

(HealthDay)—For patients with type 2 diabetes, asymptomatic gastritis is associated with metformin-related gastrointestinal side effects, according to a study published online May 29 in the *Journal of Clinical Pharmacy and Therapeutics*.

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Yuxin Huang, M.D., from the Shanghai Huadong Hospital affiliated to Fudan University, and colleagues examined whether asymptomatic chronic gastritis could influence metformin tolerance in patients with type 2 diabetes. Data were included for 144 metformin-naive patients; all subjects started metformin at 500 mg/day and increased progressively to 1,500 mg/day over four weeks. Each week a score of [gastrointestinal side effects](#) was assessed, and metformin dose was adjusted as appropriate.

The researchers categorized 64 patients as non-gastritis subjects and 80 as chronic gastritis subjects based on endoscopy. No statistical difference was seen between the groups for [gastrointestinal symptoms](#) at baseline. With metformin, the mean scores for abdominal pain, nausea, vomiting, and bloating were 1.02 versus 2.18 ($P = 0.001$), 0.20 versus 0.50 ($P = 0.022$), 0

APA citation: Gastritis linked to metformin-related GI side effects in T2DM (2015, June 5) retrieved 11 June 2022 from <https://medicalxpress.com/news/2015-06-gastritis-linked-metformin-related-gi-side.html>

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