Fecal microbiota transplantation (FMT) is when stool is taken from a healthy donor, made into a liquid mixture, and then transferred into your intestine. Helpful bacteria with normal gut bacteria are introduced to boost the gut microbiome and relieve symptoms.

Who Is a Candidate for Fecal Microbiota Transplantation?

FMT is an effective and approved procedure used to treat Clostridium difficile infection if it has occurred at least 3 times despite adequate antibiotic treatment. There is ongoing research to determine if FMT may work for other health issues.

You may not be a good candidate for FMT; the procedure is risky if you are taking drugs that suppress the immune system, have had a recent bone marrow transplant, or have cirrhosis, advanced human immunodeficiency virus, or AIDS. If you are in one of these groups, your doctor may urge against FMT, based on how bad your C difficile infection is and whether you have other problems.

What Is a Clostridium difficile Infection?

C difficile is a bacterium that can grow in your intestines and cause an infection, resulting in bad gastrointestinal symptoms that sometimes can be serious. A C difficile infection is very contagious, and it can take a long time to get rid of C difficile and start feeling better.

C difficile usually can be treated with antibiotics, but sometimes you may need more intense treatments to get rid of the infection, such as FMT.

Outcomes

FMT is considered a successful treatment of C difficile if you have no relapses for 8 weeks. Research has shown that FMT has a high success rate, although if you have recurrent or stubborn C difficile you may need more than 1 transplant.

If your doctor suggests you have an FMT, ask them to learn more about the AGA Fecal Microbiota Transplantation (FMT) National Registry at www.gastro.org/fmtregistry. If you have received an FMT, you are strongly encouraged to be a part of it.