

LETTER TO THE EDITOR

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Racecadotril versus loperamide for the treatment of acute diarrhoea

Poulami Roy¹ and Novonil Deb^{1*}

To the Editor,

Acute diarrhoea is a common ailment that affects individuals of all ages and can lead to significant morbidity and mortality if not appropriately managed. The current treatment options available include antibiotics, probiotics, and antimotility agents such as loperamide and racecadotril.

Background

Loperamide has been the gold standard for the treatment of acute diarrhoea for several decades. Loperamide works by inhibiting intestinal motility, thereby increasing the time for water and electrolyte absorption and reducing the frequency of bowel movements. However, recent studies have shown that loperamide may be associated with adverse effects such as constipation, abdominal cramps, and bloating. Moreover, it is contraindicated in patients with dysentery or bacterial enterocolitis due to the risk of toxic megacolon. On the other hand, racecadotril is a newer anti-secretory agent that acts by inhibiting the enzyme enkephalinase, thereby increasing the concentration of endogenous opioids, which reduce intestinal fluid secretion. Racecadotril has been shown to be effective in the treatment of acute diarrhoea and has fewer adverse effects compared to loperamide.

Main article

Acute diarrhoea is a common condition that can cause significant discomfort and disruption to daily activities, and effective treatment is essential for patient comfort and overall health.

Both racecadotril and loperamide are commonly used medications for the treatment of acute diarrhoea. However, recent studies have suggested that racecadotril may be a more effective and safer option for patients with acute diarrhoea caused by infectious agents.

A recent comprehensive review and meta-analysis found that racecadotril was more effective than loperamide in reducing the duration of diarrhoea in both adults and children with acute diarrhoea [1]. The study authors noted that racecadotril was associated with fewer adverse effects than loperamide and may be a better option for patients with acute diarrhoea caused by infectious agents.

Furthermore, a randomized controlled trial conducted in 2018 found that racecadotril was more effective than loperamide in reducing the duration of diarrhoea and improving stool consistency in adult patients with acute diarrhoea [2].

In light of these findings, it is important for healthcare providers to carefully evaluate the individual patient's condition and medical history to determine the most appropriate treatment approach. While both racecadotril and loperamide are effective treatments for acute diarrhoea, racecadotril may be a more effective and safer option for patients with acute diarrhoea caused by infectious agents.

Conclusion

Racecadotril has a faster time to cessation of diarrhoea and fewer adverse effects compared to loperamide. Moreover, racecadotril has no contraindications and

*Correspondence:

Novonil Deb
novonil1999@gmail.com

¹ Department of Medicine, North Bengal Medical College and Hospital, Siliguri, India

can be safely used in patients with dysentery or bacterial enterocolitis. Therefore, it may be a better alternative to loperamide for the treatment of acute diarrhoea.

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Consent for publication

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Competing interests

The authors read and approved the final manuscript.

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