

# Functional dyspepsia: an evolving multidimensional enigma

## *Dispepsia funcional: un enigma multidimensional en evolución*

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The second issue of *Clínicas de Gastroenterología de México* is entirely dedicated to a disorder as prevalent as it is complex: functional dyspepsia (FD). This issue offers a comprehensive review of its multiple dimensions, from pathophysiology to therapeutic management, consolidating an integrative and contemporary vision that redefines our understanding of this syndrome.

It begins with a necessary reflection on its definition and diagnostic classification, particularly in the context of the Rome criteria, and presents its high prevalence in Latin America. Far from being a homogeneous condition, functional dyspepsia emerges as a constellation of symptoms influenced by genetic, environmental, dietary, and psychosocial factors, with a profound impact on quality of life and the healthcare system.

The pathophysiological approach demonstrates the interaction of multiple mechanisms: visceral hypersensitivity, alterations in gastric motility, dysbiosis, low-grade inflammation, and even disorders of the gut-brain axis. These variables not only help to better understand the clinical heterogeneity but also open new therapeutic avenues.

This issue also marks a step forward in the clinical diagnosis of FD, integrating validated questionnaires, motor assessment technologies, and emerging biomarkers. Additionally, a critical analysis of the role of *Helicobacter pylori* is presented, emphasizing that its eradication does not always translate into symptomatic

relief, particularly in a context of increasing antibiotic resistance.

Particular attention is given to the blurred boundary between dyspepsia and other conditions such as gastroparesis, irritable bowel syndrome, and eating disorders. These overlaps remind us that diagnostic boundaries are often artificial and that the patient must be understood in all their biopsychosocial complexity.

Regarding treatment, both pharmacological strategies – classical and emerging – and non-pharmacological approaches are explored, including elimination diets, intermittent fasting, nutraceuticals, and psychotherapy. The relationship between FD and mental health, addressed as a bidirectional interaction, underscores the need for comprehensive treatments that include modulation of the gut-brain axis.

Finally, the link between FD and eating disorders raises an urgent clinical alert, particularly in young populations. Early detection, the use of specific tools, and collaboration among gastroenterology, psychiatry, and nutrition are positioned as fundamental pillars of effective care.

This issue not only summarizes current knowledge but also drives a new way of viewing and treating FD: more personalized, more interdisciplinary, and, above all, more humane. It is thus consolidated as an indispensable reference for professionals who face this clinical challenge on a daily basis.

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Date of reception: 30-07-2025

Date of acceptance: 25-08-2025

DOI: 10.24875/CGME.M25000012

Available online: 04-12-2025

Clín. Gastroenterol. Méx. (Eng). 2025;1(2):103

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