



Research Summary: Leaky Gut Healing

As featured in Dr. Kenny Mittelstadt's video:
Top Ways to Help Heal Leaky Gut (And Why They Work)
Date of Publication: 06/04/2026

Research Context:

This week's topic explores why healing the gut lining isn't just about adding the right ingredients... it's about understanding what your gut barrier actually needs, and in what order.

The research below connects three distinct mechanisms: how gut bacteria fuel the repair of your gut lining, how bovine colostrum supports barrier integrity through multiple pathways at once, and what the evidence actually shows about probiotics and prebiotics when it comes to measurable markers of intestinal permeability.

Together, these studies help explain a pattern that shows up often in practice: people doing a lot of the right things without the framework that makes them work.

Key Findings from the Research:

Study 1 ([PMID 39284033](#)):

A 2024 review by Mirzaei et al. examined how gut bacteria and the compounds they produce, particularly short-chain fatty acids, influence host health and disease. The one that matters most for your gut lining is butyrate, a fatty acid your gut bacteria make when they ferment certain fibers. The review found butyrate works through two pathways at the barrier level: it increases production of tight junction proteins (the gatekeepers that determine what crosses into your bloodstream), and it serves as the primary fuel source for your colonocytes, the cells that make up your gut lining. When you eat prebiotic-rich foods like cooked root vegetables, you're activating a specific repair mechanism, not just supporting gut health in some vague sense.

Study 2 ([PMID 38361147](#)):

A 2024 meta-analysis by Hajihashemi et al. in *Digestive Diseases and Sciences* pulled together 10 randomized controlled trials on bovine colostrum, the first milk produced after birth in cows, and intestinal permeability. Across athletic populations and patients with gut compromise, colostrum produced a significant, measurable reduction in permeability. What makes it clinically interesting is that it works through several pathways simultaneously: supporting tight junction integrity, providing immunoglobulins that help regulate the immune response at the gut surface, and delivering growth factors that support mucosal repair. Most interventions work through one mechanism. This one works through several at once.

Study 3 ([PMID 40378939](#)):

A recent meta-analysis examined the effect of probiotics, synbiotics, and prebiotics on measurable permeability markers, including zonulin, a protein that serves as a loose indicator of how permeable the gut lining is. The analysis found genuine evidence these interventions reduce both zonulin and inflammatory markers. But results varied significantly by strain, dose, and the individual's baseline microbial environment. Taking a probiotic without knowing your microbiome's current state is like planting a seed without knowing the soil. Some people respond quickly, others take the same product for months without a meaningful shift, not because probiotics don't work, but because their terrain wasn't ready.



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Functional Medicine Connections:

Here's how these pieces fit together: your gut lining is not a passive tube. It's an active barrier maintained by specific cells, fueled by specific compounds, and regulated by a microbial environment that is either supporting that work or competing with it. The three studies above each illuminate a different layer of that system.

Butyrate connects your food choices to your gut lining at the cellular level. Bovine colostrum provides a kind of multi-signal support that addresses barrier integrity, surface immunity, and mucosal repair at the same time. And the probiotic and prebiotic data reminds us that the microbial terrain you're working with shapes how much room any of these inputs have to do their job.

This is why sequencing matters in a functional medicine context. If the inputs that are actively eroding the barrier... chronic stress, certain medications, emulsifiers in processed foods, significant dysbiosis... are still present, layering healing supplements on top of them produces inconsistent results. The research supports what good clinical practice has shown repeatedly: the terrain has to be considered before the ingredient list.

Practical Reflections & Takeaways:

When you think about your own gut health history, have you focused more on what to add or on understanding what might still be working against your barrier? It's worth sitting with that question, because the answer often points toward why previous attempts felt incomplete.

If you've tried probiotics, colostrum, or bone broth without seeing the results you expected, what do you actually know about the state of your microbial environment before you started? Not knowing that starting point is one of the most common reasons the right inputs don't land the way they should.

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