

Irritable Bowel Syndrome

(IBS)

What Is IBS?

Irritable Bowel Syndrome (IBS) is a common disorder of the gastrointestinal tract that interferes with normal bowel function. *IBS* is characterized by symptoms that include: abdominal pain associated with bowel movements and irregular bowel activity.

IBS is sometimes referred to as **spastic colon**, **spastic colitis**, **nervous stomach**, **nervous colon**, or **nervous diarrhea**.

Facts about *IBS*:

- Up to 20% of the US population report symptoms consistent with *IBS*
- It is the most common functional bowel disorder
- It is the most common gastrointestinal diagnosis among gastroenterology practices in the US
- It is one of the top 10 reasons why people contact their primary care provider
- It tends to affect more women than men (about 70% of individuals who suffer with *IBS* are women)

Recognizing the Symptoms

The characteristic symptoms of *IBS* are abdominal discomfort and disturbance of bowel habits, such as diarrhea, constipation, or both, in an alternating pattern.

Patients with *IBS* may also suffer from a variety of other symptoms including:

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|--|-------------------------------------|
| ■ Straining | ■ Abdominal pain |
| ■ Urgency | ■ Pain relieved with bowel movement |
| ■ Presence of mucus in stools | ■ Very frequent stools |
| ■ Bloating | ■ Very infrequent stools |
| ■ Feeling of incomplete bowel movement | ■ Lumpy hard stools |
| | ■ Loose watery stools |

The symptoms can vary considerably from one patient to another.

IBS can occur in any person at any age but it is perhaps most frequent in women between the ages of 15 and 50.

Diagnosing IBS

A diagnosis of *IBS* is usually based on the presence of abdominal pain over at least 12 weeks (not necessarily consecutive weeks) within the preceding year. The abdominal pain has at least two of the following features:

- It is relieved with bowel movement
- The onset is associated with a change in frequency of the stool
- The onset is associated with a change in the form (appearance) of the stool

To reach a diagnosis of *IBS*, other possible causes of abdominal pain must be evaluated and eliminated. During the evaluation, the physician will be careful to evaluate the individual's history and will perform a thorough physical examination.

A history of symptoms during the night or a family history of gastrointestinal diseases or cancer may alert the physician to conduct more in-depth investigation. Individuals who report a new onset of symptoms at over 50 years of age also should receive an extensive evaluation of other possible causes.

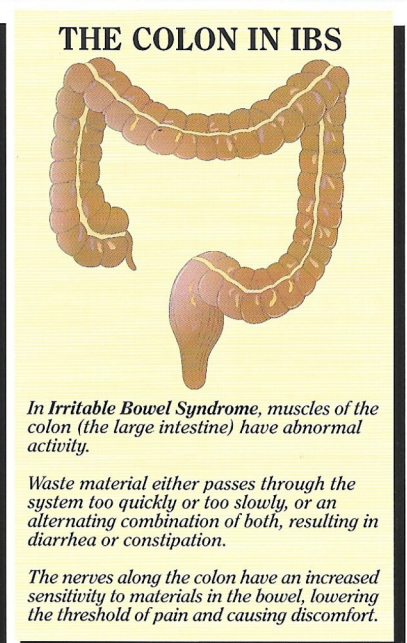
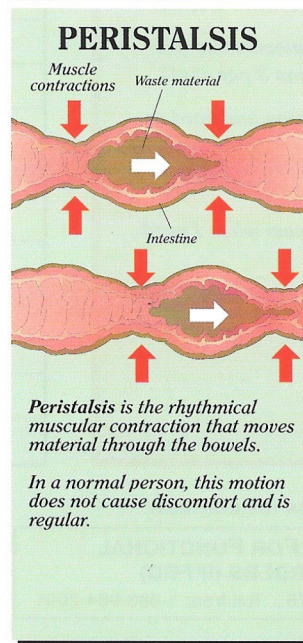
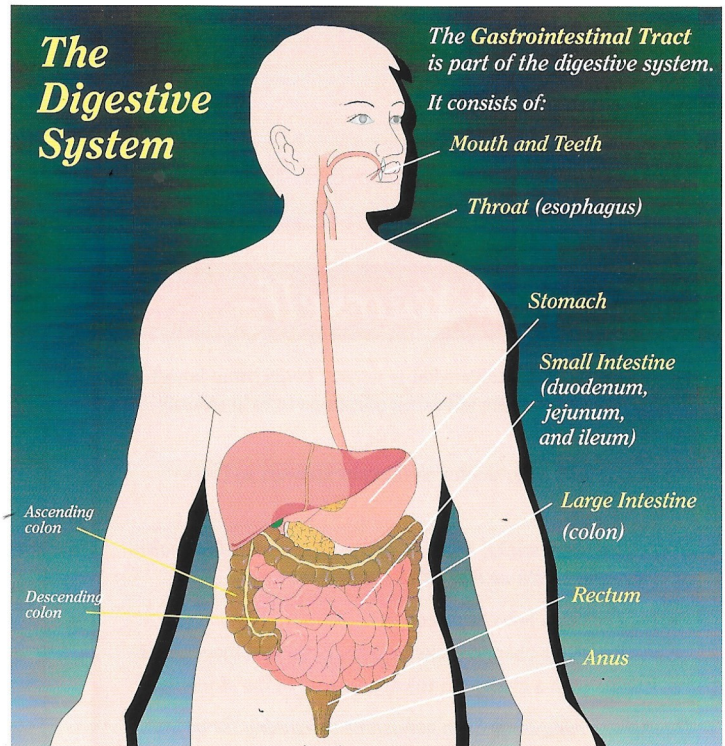
Specific symptoms which may suggest an alternative or additional diagnosis include:

- Fever
- Anemia
- Weight loss
- Rectal bleeding
- New onset of symptoms at over 50 years old
- Symptoms present for less than 6 months

What Causes IBS?

The cause of *IBS* is unknown. The factors which trigger or aggravate the symptoms of *IBS* may be different in every person. These factors include:

- Fatty and spicy foods
- Beans or other gas-producing foods
- Alcohol and caffeine
- Food allergies, including lactose intolerance or gluten sensitivity
- Stress
- Diarrhea caused by infection



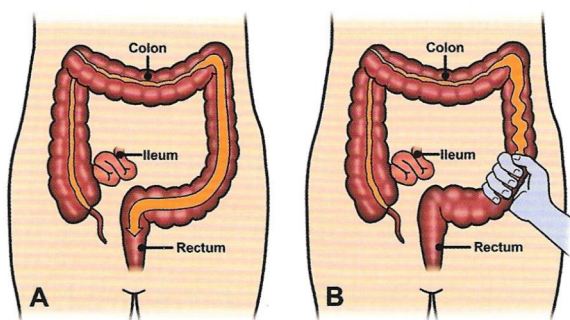
Irritable Bowel Syndrome



ASCRS
American Society of
Colon and Rectal Surgeons

Irritable Bowel Syndrome

Irritable bowel syndrome (IBS) is a common disorder, affecting an estimated 15% of the population. It is one of the several conditions known as functional gastrointestinal disorders. This means the bowel may function abnormally, but tests are normal and there are no detectable structural defects.



Symptoms

Symptoms vary from person to person and can range from mild to severe. IBS is a long-term condition, so symptoms may come and go and change over time. Fever, low red blood cell levels, rectal bleeding and unexplained weight loss are not signs of IBS and may indicate a serious medical problem.

IBS symptoms include:

- Abdominal pain.
- Fullness.
- Gas and bloating.
- Change in bowel habits.
- Alternating diarrhea, constipation or both.

Causes

No clear answer exists as to what causes IBS. It is believed that the symptoms occur due to abnormal functioning or communication between the nervous system and bowel muscles. Abnormal regulation may result in increased bowel "irritation" or sensitivity. The muscles in the bowel wall may lose their coordination, contracting too much or too little at certain times. While there is no physical obstruction, a patient may feel like cramps are a functional blockage.

Risk Factors

All of the following have been identified as possible IBS risk factors:

- Gender: IBS is nearly twice as common in women as men.
- Environmental factors.
- Genetic factors.
- Bacterial activity in the gut.
- Bacterial overgrowth.
- Food intolerance.
- Altered ability of the bowel to move freely.
- Oversensitive intestines.
- Altered nervous system processing.
- Altered hormonal regulation.

The Role of Stress

IBS is not caused by stress or anxiety and is not a mental health disorder. However, emotional stress may be a factor in the onset of IBS episodes. Many people experience worse IBS symptoms when they are nervous or anxious.

Diagnosis

No single test can confirm the diagnosis of IBS. A careful history and physical examination by a colon and rectal surgeon or other physician is essential. This is done to rule out more serious conditions. The two following criteria are helpful in making a diagnosis:

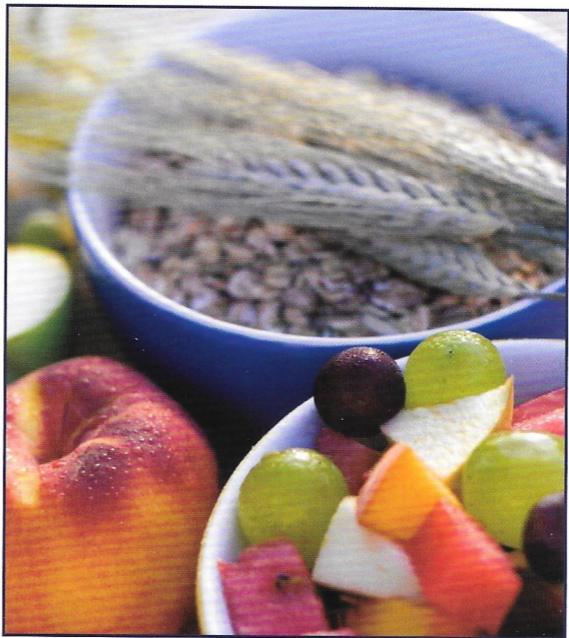
- Symptoms (described above) occur at least three days a month for three months.
- IBS discomfort improves after a bowel movement or passage of gas.

Treatment

Stress and anxiety do not cause IBS, but may trigger episodes or makes symptoms worse. Knowing that IBS is not a serious condition may ease a patient's anxiety or stress. The goal of treatment is to relieve symptoms. There may be some trial and error before an effective approach is found.

Non-Medical Treatment

- Regular exercise.
- Improved sleep habits.
- Stress reduction.
- Behavioral therapy.
- Physical therapy.
- Biofeedback.
- Relaxation or pain management techniques.
- Probiotics.
- Dietary changes.



The Role of Diet

Dietary fiber can play a positive or negative role in IBS. For some people, too much fiber can increase bloating and cause abdominal pain. For others, eating foods high in fiber can help ease chronic constipation. Using a diary for two or three weeks can help identify foods and activities that seem to trigger or worsen symptoms.

Medical Treatment

No single medication works for everyone. People with moderate to severe IBS may benefit from prescribed medication. Anti-spasmodic medication may help control symptoms. Other patients improve when prescribed antidepressants in low doses.

Post-Treatment Prognosis

Having IBS does not put you at risk for more serious problems. The condition does not cause cancer, bleeding, or inflammatory bowel diseases such as ulcerative colitis. However, if you experience rectal bleeding or unexplained weight loss, you should consult a colon and rectal surgeon as soon as possible.

Patience is the key when dealing with this condition. Achieving relief from IBS symptoms can be a slow process. It may take six months or longer for symptoms to improve. If nothing is done, symptoms may come and go. The condition may improve or get worse over time and continue to impact the quality of your life.