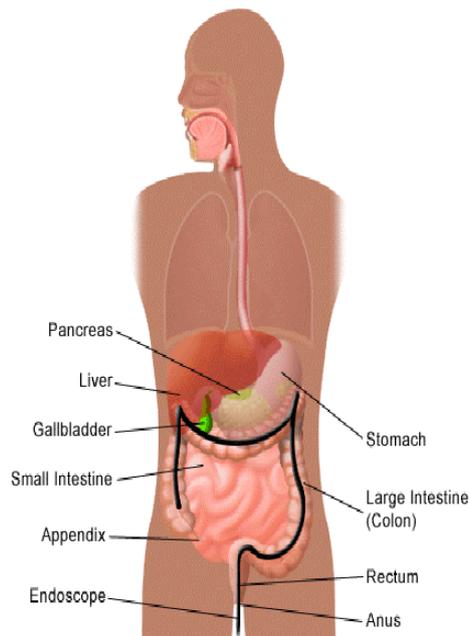


## Community Endoscopy Service

### Irritable Bowel Syndrome



#### **What is irritable bowel syndrome?**

The Irritable Bowel Syndrome (IBS) consists of a number of symptoms. The term 'syndrome' seems quite grand but it is just the word that doctors use to describe a collection of symptoms. The most important symptoms in IBS are abdominal pain and abnormal bowel habit. Many patients with IBS get crampy abdominal discomfort or pain which comes and goes and is often relieved by opening the bowels. The bowel habit is often irregular – sometimes diarrhoea, sometimes constipation and quite often swinging between these two extremes. Some patients may notice that they need to get to a toilet in a hurry. Other symptoms vary from individual to individual but include abdominal bloating, a sense of incomplete emptying of the bowels and passage of mucus (slime) from the back passage. Many patients notice they lack energy and sleep poorly.

#### **Is it common?**

IBS is one of the most common reasons for a patient to visit their GP. It is also a very frequent reason for GPs to refer patients to a hospital specialist and up to one third of the population experience symptoms from time to time. Women are slightly more affected than men.

### **What causes IBS?**

We do not think that IBS has a single cause. There are many reasons why people develop the condition. One in six people notice IBS developing after they have had a bout of food poisoning or gastroenteritis. Some people believe that stress, for example, makes their symptoms worse. It seems probable that over activity of the nerves and muscles of the gut play a role too.

### **Why is it painful?**

Digestion is usually painless and we do not realise that it is happening unless there is abnormal squeeze within the bowel or if the intestine becomes overactive. Some patients with IBS seem to have increased sensitivity to the way that their digestive tract functions.

### **Should I see my doctor?**

You may have had symptoms for many years without seeking help from your doctor and this is fine as long as you are coping well. Obviously, your doctor is there to help you if symptoms become troublesome or interfere with your life. If you develop any alarming symptoms listed below you should certainly ask for advice.

### **Symptoms that may have cause for alarm**

- A change in bowel habit – especially if you are over the age of 40
- Passing blood from the back passage
- Unintentional weight loss of more than 2 kg (4 pounds)
- Diarrhoea waking you from sleep
- Fever

### **How can I help myself?**

A healthy lifestyle may improve symptoms. Particular care should be given to your eating habits and to developing a regular routine for opening your bowels. You may find that particular foods trigger an attack of pain. Keeping a food diary together with a record of bowel symptoms may be helpful since you might be able to see whether there is a pattern. Foods which commonly cause upset include wheat products, dairy products, onion, nuts and caffeine containing drinks such as coffee, tea and cola. Some patients cannot digest lactose (which is the sugar in milk) and so develop wind and diarrhoea after taking large amounts of milk or dairy products which can include cream, cheese, yoghurt and chocolate.

### **What treatment is offered?**

There is no cure for IBS but it can be eased with medication. If a dietary cause is suspected your doctor may be able to give you some advice on what to eat or may suggest that you see a dietician to identify foods that upset you. You may be asked to leave out particular sorts of foods from your diet, such as wheat, to see whether that helps. If constipation is the main problem then bulking agents such as bran, bran-containing cereals and ispaghula husk (a natural laxative) are helpful.

### **If I see my doctor what tests might I have?**

Your general practitioner will want to rule out other disease, but will probably be able to make a diagnosis based on the symptoms that you describe. It may be necessary to do a simple blood test to rule out anaemia, to make sure the liver and thyroid glands are working properly and to exclude any evidence of inflammation within the bowel. You might also have a blood test to look for intolerance to wheat.

### **Drug Therapy**

Drugs to reduce bowel spasm have been used for many years. They are generally very safe and often worth trying. They are mostly available without prescription and your pharmacist will be happy to advise you. Unfortunately they only benefit a relatively small number of patients.

As new drugs are beginning to develop, some of which may help patients whose main symptom is diarrhoea and others who tend to be constipated. Some newer agents are not yet available to doctors to prescribe but it does seem likely that a wider range of treatments will be available to patients with IBS in the near future. Sometimes when pain is the major problem, small doses of drugs which are used as antidepressants such as Amitriptyline can be helpful. These can be useful in patients who have no signs of being depressed.

### **Are other treatments available?**

Acupuncture, hypnotherapy and relaxation therapy have been shown to be effective. Hypnotherapy can be obtained through approved therapists who should be members of the British Medical Hypnotherapy Association. Your doctor may advise on counselling, and some specialists believe that a psychological treatment called cognitive behavioural therapy (CBT) can be helpful.

### **What research is needed?**

The most important question for researchers in IBS is to find out what causes the condition. Knowing this will enable more rational and more effective treatments to be developed. As more is revealed about the causes of IBS, it is likely that different patterns of symptoms will require differing approaches to treatment. In addition, we need to know more about the mechanism by which specific foods cause IBS as well as how psychological factors can unsettle our insides.