



Irritable Bowel Syndrome (IBS)

What is IBS?

About 15% of adults report IBS symptoms. The cause of this disorder is an abnormality in the way the muscles and nerves of the gut function or contract. IBS is your "GUTS" response to your environment. (Foods, hormones, stress, etc) Even when the muscles appear normal under a microscope, they may not function normally, contracting too forcefully or weakly, too slowly or rapidly, at times.

What causes IBS?

- ❑ **Exaggerated bowel function:** contractions, spasms and pain in response to certain foods, psychological or physical stress
- ❑ **Over-sensitivity:** pain and bloating is felt when changes in volumes & pressures occur, ^{best} described as hypersensitivity.
- ❑ **Psychosocial Factors:** IBS patients may have depression, anxiety, and lower stress tolerance levels or are chronic worriers. "Things seem to get to them more". Stress may affect the ability to cope and can alter motor function in the bowel. A history of abuse in childhood (sexual or physical) may be seen. 50% of patients can identify a distressful event prior to symptoms.
- ❑ **Previous Gastroenteritis (Infection)** IBS is more likely to develop with a history of gastroenteritis and stressful life event during an infection. There is no evidence that Candida causes irritable bowel symptoms
- ❑ **Chemical imbalance** There may be increased excitability of the nervous system of the gut and disturbance of chemicals such as catecholamines and serotonin. Patients with IBS have increased serotonin levels in blood and colon. This can alter pain threshold in patients with IBS.

How is it diagnosed?

The diagnosis of IBS is suggested when a patient's symptoms meet the certain criteria. There are no abnormalities on physical examination and no pathology on laboratory testing or colonoscopy. In patients with diarrhoea, a biopsy of the bowel obtained should be rule out Colitis and Crohn's disease. Celiac disease and lactose intolerance should be excluded. **Alarm symptoms** include rectal bleeding, anemia, weight loss, fever, severe constipation, a family history of gastrointestinal cancer, inflammatory bowel disease, celiac disease and the onset of symptoms at the age of 50 years.

What treatment is available?

Have a diet **HIGH** in

- **Protein** (chicken, fish, beef, veal, pork, egg, tofu)
- **Fresh vegetable and fruit** (limit the amount of citrus fruits)
- **Water** at least 1.5 litre/day
- **Fibre** (30gm daily) (**Normafibe / Normacol Plus 2 teaspoons x2 day**)
- **Peppermint** tea or oil capsules may be beneficial (**Mintec** 2 tablets 30 minutes before meals x3/day)

Have a diet **LOW** in (common **TRIGGERS** of IBS)

- **Stimulants** such as caffeine, tea, alcohol, nicotine, chocolate and cola drinks,
- **Starch & carbohydrates:** breads, oats, barley, rye, and pasta. rice, potatoes, pumpkin, corn, pastry, cakes
- **Lactose** (dairy) / **Fructose** (wheat, onion, apples, pears, green, beans, mango, watermelon)
- **Takeaway foods** such as McDonalds, Pizzas etc which contain refined high density man made carbohydrates
- **Fatty food**, fried foods, animal fat, cheese, butter, oil, rich foods and creamy sauces and gravies
- **Gas producing foods:** beans cabbage, broccoli, cauliflower, onion, sprouts
- **Gaseous / carbonated drinks**
- **Codeine based pain killers** - (drugs such as panadol or digesic are a better substitute)

Other helpful facts

- **Listening to the signals** from your bowels after eating can be beneficial (normal gastrocolic reflex)
- **Exercise** 30 minute x3/ week
- **Relaxation exercises (meditation), behavioural therapy** can assist in coping with your IBS
- **Relaxants of the nervous system of the gut** (drugs such as Prozac) may help
- **Diarrhoea predominant** patients may benefit from lomotil or imodium.
- **Constipation predominant** patients may benefit from fibre and laxatives.

Establishment of trust in the physician–patient relationship should be given a high priority in order to maximise the efficacy of treatment. A diary of food intake and symptoms can be useful in identifying foods that may be associated with symptoms of the irritable bowel syndrome. It is important to establish trust in your gastroenterologist and GP, and to set realistic expectations