

# IRRITABLE BOWEL SYNDROME

IBS is a condition which features recurrent abdominal pain and intermittent diarrhoea, often alternating with constipation. IBS is an extremely common condition and is estimated to affect up to one third of the population to some extent. It is most common in women between the ages of 20 and 30. The syndrome is not the same as Ulcerative Colitis. Colitis is an inflammation of the colon, whereas in IBS, the colon is not inflamed.

## Symptoms

The condition features repeated abdominal pain and occasional diarrhoea, often alternating with constipation, rapid transit of food with frequent bowel motions, a sense of fullness (bloating), abdominal tenderness and swelling, an awareness of the bowel action and often headache and anxiety.

Bowel contents are moved along by a succession of rhythmical tightening and relaxation of segments of the intestine. This is called peristalsis. In the irritable bowel syndrome peristalsis is stronger and more frequent than normal.

The effect of this may be to make bowel activity much more noisy than normal. The pain can occur in any part of the intestinal tract. It is sometimes brought on by eating, and is often relieved by going to the toilet. Often, soon after a meal, there is extreme and embarrassing urgency to empty the bowels. Other symptoms include:

- burping,
- bad breath,
- excessive gas production,
- headache,
- tiredness,
- nausea, and
- a sense of incomplete emptying after going to the toilet.

## Causes

The precise cause of irritable bowel syndrome is unknown. The condition often begins during a period of emotional stress and symptoms worsen in stressful situations.

Up to 60% of people with the syndrome have psychological symptoms such as anxiety and depression. The disorder sometimes develops after a gastrointestinal infection. An increased sensitivity or intolerance to certain foods may also contribute.

## Diagnosis

A doctor will generally make a diagnosis of IBS from the typical symptoms, along with a physical examination. There is no test that can diagnose IBS. In some cases further investigation may be needed to rule out other conditions that can cause similar symptoms. Further investigation may be needed if:

- the person is over 45 years old,
- there is bleeding from the rectum,
- there is blood with the stools,
- there is weight loss or anaemia,
- there are signs of infection, or
- there is a family history of cancer or inflammatory bowel disease.

## Treatment

### Diet

Making changes to the diet can help to control the symptoms of IBS. Keep a note of what you eat over a couple of weeks to help you to identify the foods that seem to trigger your symptoms. Try avoiding these foods for a while to see if there's any improvement. It can be helpful to cut out spicy and fatty foods from the diet, as well as gas producing vegetables such as beans. Try to drink less alcohol and cut down tea and coffee that both contain caffeine. Cutting out products that contain an artificial sweetener called sorbitol can help some people. Try to eat more fruit and vegetables to increase the amount of dietary fibre (roughage) in your diet this helps to prevent constipation. It's also important to drink plenty of water to flush waste products out of your body.

### Drug treatments

Several drugs are effective in quieting down the excessive bowel activity and relieving the pain. Many of these are available over the counter in your pharmacy. Antispasmodic drugs such as peppermint oil capsules (Colpermin<sup>®</sup>) can slow contractions in the bowel, which helps with diarrhoea and pain.

Effective antidiarrhoeal drugs such as loperamide (Imodium<sup>®</sup>) can be used when necessary. For constipation, an osmotic laxative is preferred over stimulant laxatives. Simeticone (Imogas<sup>®</sup>) has recently become available over the counter in pharmacies for patients suffering from excess gas. There is other medication available from your doctor on prescription where over the counter treatments do not work.