

# INSTITUTE OF COLORECTAL SURGERY



FAQs on IRRITABLE BOWEL SYNDROME (IBS)

## WHAT IS 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 problems. The treatment for IBS is medical, and surgery is not indicated for this problem. This is a different problem from Inflammatory Bowel Disease (IBD).

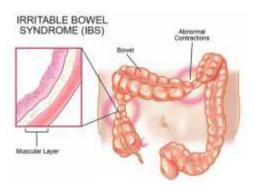
IBS is a syndrome, a pattern of symptoms such as pain and bloating that tend to occur together. It is not a "disease" in the normal sense of the word (i.e., it cannot be caught or transmitted from person to person as a cold can, nor can it be cured by an operation or medication). It is not life-threatening.

## WHAT ARE THE SYMPTOMS OF IBS?

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 or symptoms of IBS and may indicate a serious medical problem.

#### IBS symptoms include:

- Abdominal pain and cramping
- Fullness
- Gas and bloating



- Change in bowel habits, including the sensation of blockage or squeezing of the colon
- Alternating diarrhoea or constipation or both

## WHAT CAUSES IBS?

The underlying cause of this disorder is an abnormality in the way the intestinal muscles contract. These muscles, which form the outer layer of the intestine, work automatically to move food products along the intestine to the rectum and out the anus. IBS is a disorder of the function of the intestinal muscles. Even when the muscles appear normal under a microscope, they may not function normally, contracting too forcefully or weakly, too slowly or rapidly, at certain times. A colonoscopy will be normal. A pelvic outlet problem has to be ruled out.

### WHAT ROLE DOES STRESS PLAY IN IBS?

Emotional stress may contribute to IBS. The brain and the intestine are closely connected by nerve fibres that control the automatic functioning of the intestinal muscles, and many people may experience nausea or diarrhoea when nervous or anxious. While we may not be able to control the effect stress has on our intestines, reducing the sources of stress in our lives - high pressure jobs, family tensions, etc. - may alleviate symptoms of IBS.

## HOW CAN I TELL IF THE PROBLEMIS IBS OR SOMETHING ELSE?

A careful medical history and physical examination by a colon and rectal surgeon or other physician are essential to proper diagnosis. Tests performed to ensure that your symptoms are not caused by other problems may include a flexible sigmoidoscopic examination, colonoscopy, a hemmocult test to detect hidden blood in the stool, an x-ray examination of the lower intestines and psychological evaluation. These tests may rule out other diseases or conditions-cancer, diverticulitis, inflammation of the intestines or depression.

#### **HOW IS IBS TREATED?**

Simply understanding that IBS is not a serious or life threatening condition may relieve anxiety and stress, which often contribute to the problem. Mental health counselling and stress reduction (relaxation training) can help relieve the symptoms of IBS in some individuals.

In others, increasing me amount of non-digestible, bulk-forming foods ("roughage") in the diet may be all that is needed to relieve symptoms. Adding roughage, such as psyllium seed, to your diet may eliminate or lessen the severity of cramps, result in softer stools that pass along the intestine more easily, and absorb excess water in the intestine to prevent diarrhoea. When the major complaint is constipation, additional water should be provided in the diet along with bulk agents to soften the stool.

In some cases, dietary roughage alone may not provide adequate relief from cramping and bloating. Your doctor may prescribe medications that act directly on the intestinal muscles to help the contractions return to normal. Some people obtain greater relief from one medication than another. Therefore, your doctor may recommend changing medications to improve symptoms.

## ARE THERE ANY FOODS TO BE AVOIDED?

Sometimes, Caffeine, milk products or alcohol can make symptoms of IBS worse. Your doctor may recommend avoiding foods that contains significant amount of caffeine coffee, tea, chocolate and cola drinks, for example-and alcoholic beverages, including beer, wine and "mixed" drinks. Your doctor may also recommend that you avoid dairy products, such as cheese and milk, which may cause diarrhoea in some people and constipation in others. In addition, smokers should be aware: IBS symptoms may be aggravated by nicotine.

## HOW LONG DOES THE TREATMENT TAKE TO RELIEVE SYMPTOMS?

Relief of IBS symptoms is often a slow process. It



may take six months or more for definite improvement to be appreciated. Patience is extremely important in dealing with this problem. The tendency for the intestine to respond to stress will always be present. With attention to proper diet, an increase in dietary roughage, and in some cases, use of appropriate medications, the symptoms of IBS can be greatly improved or eliminated.

## **CAN IBS LEAD TO MORE SERIOUS PROBLEMS?**

IBS does not cause cancer, bleeding or inflammatory bowel diseases, such as ulcerative colitis. Over the long run IBS can be associated with but does not cause diverticulosis, "pockets" in the intestinal wall, which is a benign condition. This can occasionally result in diverticulitis, an inflammatory condition of one or more of the diverticula or "pockets" in the intestine that sometimes requires surgery. Treatment of IBS with bulk agents helps to prevent diverticulosis and other colon problems..

## WHO IS A COLON AND RECTAL SURGEON?

Colon and rectal surgeons are experts in the surgical and nonsurgical treatment of colon and rectal problems. They have completed advanced training in the treatment of colon and rectal problems in addition to full training in general surgery. Colon and rectal surgeons treat benign and malignant conditions, perform routine screening examinations and surgically treat problems when necessary.

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