What Is Irritable Bowel Syndrome?



Do I Have Irritable Bowel Syndrome?

Irritable Bowel Syndrome (IBS) is described as chronically recurring abdominal discomfort or pain and altered bowel habits. Symptoms include bloating, feelings of incomplete elimination of stool, presence of mucus in the stool, straining or increased urgency (depending on the subtype of IBS), and increased gastrointestinal (GI) complaints associated with psychosocial distress.

Diagnosis is based on international consensus criteria, known as the Rome criteria, along with ruling out other medical conditions that have similar symptoms. According to the Rome criteria, symptoms of abdominal discomfort must be present for *at least 3 days per month for the past 3 month and include at least two of these three features*:

- 1. Discomfort relieved by having a bowel movement
- 2. Onset associated with a change in frequency of stool
- 3. Onset associated with a change in form of stool

There are three subtypes of IBS: diarrhea-predominant, constipation predominant or mixed.

Small intestinal bacterial overgrowth (SIBO), lactose intolerance and celiac disease have symptoms very similar to IBS. The prevalence of celiac disease is four times greater and SIBO is 40-80% more common in people with IBS. Other conditions that also present with symptoms similar to the complaints found in IBS are inflammatory bowel disease, diverticulitis, gall bladder disease, and gastrointestinal cancers. Since your symptoms may be related to one of these conditions, consideration of all these must be evaluated before treating IBS. Without ruling out these related conditions you may forever be treating the wrong condition.

Small Intestinal bacterial overgrowth (SIBO)

This is a condition of excessive bacteria in the small intestine that results in GI complaints, malabsorption and malnutrition. Some of the symptoms you may have with SIBO are gas, bloating, abdominal distention, diarrhea and pain. Constipation is less common. SIBO occurs more often in people with diminished stomach acid secretion and slow GI motility. Treatments generally include antibiotics, probiotics, a low FODMAPs diet or a low carbohydrate diet and, since Splenda may reduce beneficial gut bacteria, limit Splenda.

Celiac Disease

Celiac disease is a systemic autoimmune disorder that results in the flattening of the intestinal lining, which leads to malabsorption and malnutrition. Some of the symptoms that you may have with celiac disease are gas, bloating, constipation, diarrhea, abdominal pain, nausea, heartburn, depression, anxiety, fatigue, vision problems, canker sores, irregular periods, and joint or bone pain. You may have one or all of these symptoms. Treatment for celiac disease is a gluten-free diet. If you think you may have IBS, you should be screened with a blood test for celiac disease.

Lactose Intolerance

Lactose intolerance occurs when your intake of lactose exceeds the amount of lactase enzyme available in your intestine to breakdown lactose. Lactose in the carbohydrate found in milk, yogurt and ice cream. Some of the symptoms that you may have with lactose intolerance are gas, bloating and nausea within 30 minutes of eating foods containing lactose. Treatment for lactose intolerance is reducing lactose in your diet and digestive enzymes supplements of lactase to facilitate the digestion of lactose.

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I Have IBS, What's Happening in MY Gut?

Once you have assessed your symptoms and ruled out other causes for your GI discomfort, you probably will want to know more about IBS.

IBS is considered a functional disorder because there are no abnormalities that may be picked up on scans, ultrasounds, blood tests or other medical tests. It is diagnosed based on symptoms and the elimination of other disorders. It is often called a "brain-gut" disorder due to the relationship between the intestinal and nervous system.

Your GI tract is sensitive to the presence of food, the type of food and the volume of food that you eat, in addition to being responsive to the nervous system. People with IBS are hypersensitive to food and to their nervous system, which means that they react more significantly to food in the GI tract, dietary changes and psychosocial factors. Factors that may worsen symptoms include:

- Stress
- Excess use of laxatives
- Antibiotics
- Caffeine
- Previous GI illness
- Lack of regularity in sleep, rest and fluid intake

What Can I Do With My Diet?

Your goal is to maintain an adequate diet while controlling the symptoms of IBS. While there is no specific diet for people with IBS there are many things that you may try for yourself. These are factors that you may want to discuss with your Nutrition Counselor. More information can be found on the Campus Health website.

- Eat, drink and sleep on a consistent schedule.
- Limit large meals
- Limit excess fat, caffeine, lactose, fructose, sorbitol and/or alcohol
- If you have constipation, use a bulk fiber supplement, such as psyllium. Avoid insoluble fiber supplements, such as wheat bran.
- If you have a strong family history of allergy, you may be hypersensitive to certain foods, you may be recommended an elimination diet by your Nutrition Counselor to identify consider food intolerances
- Improve the balance of bacteria in your GI tract with prebiotic foods and probiotic supplements.
- Consider a low FODMAP diet.
- Supplement with peppermint oil and omega-3 fatty acids.

References:

Krause's Food and The Nutrition Care Process, 13th edition by Mahan, Esott-stump and Raymond, 2011

Scarlata, K. Small intestinal bacterial overgrowth-What to do when unwelcome microbes invade. *Today's Dietitian*, April 2011 <u>http://www.todaysdietitian.com/newarchives/040511p46.shtml</u>