

Irritable Bowel Syndrome 2014

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Irritable Bowel Syndrome

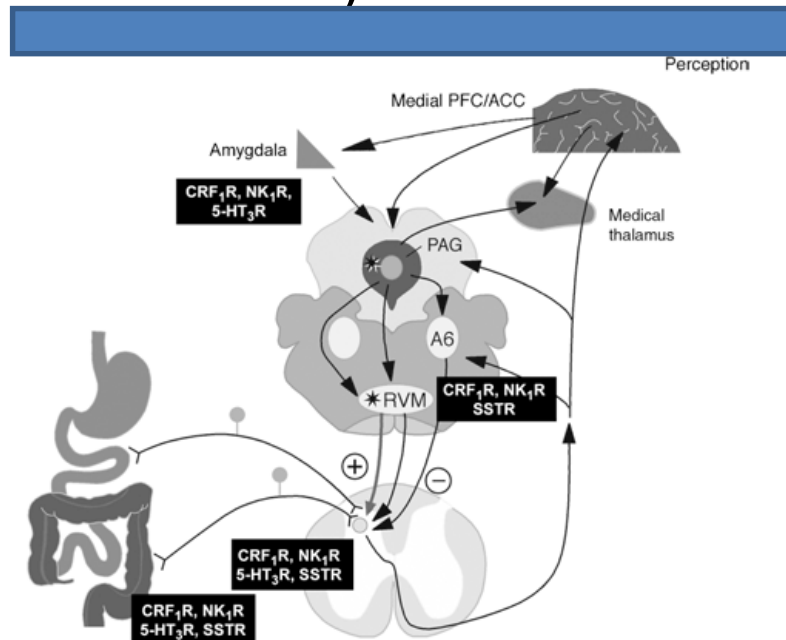
- 15% of the UK population
- Young women
- Characterised by
 - abdominal pain
 - bloating
 - altered bowel function
- Absence of Alarm symptoms

Irritable bowel or irritable body or irritable brain syndrome.....

IBS

No single cause for IBS but the symptoms can be divided into brain-gut axis

- Central processing (patient perception),
 - Neurotransmitters (especially serotonin)
 - psychological factors (stress, affective disorder)
- dysfunction of the gut
 - disorders of motility,
 - visceral hypersensitivity
 - dietary factors
- ?genetics



ELLER

Come check out
our stool
samples.



Irritable Bowel syndrome

Rome Criteria

1. Abdominal pain

Better on defaecation and/or

Onset associated with a change in frequency of stool

Onset associated with change in form of stool

2. Abnormal stool

frequency (>3/day, <3/week)

form (lumpy/hard or loose/watery)

passage (strain, urgency, tenesmus)

3. Abdominal bloating

4. Passage of mucus per rectum

How do I diagnose IBS?

12 weeks in last 12 months of abdominal pain or discomfort

- Abdominal pain or discomfort
 - Relieved by opening bowels
 - Pain associated with change in frequency, form or appearance of the stool
- Unpredictable bowel habit – urgency, diarrhoea, constipation, or alternation
- Difficulty or inability to pass stool
- Mucus
- Abdominal bloating

How do I diagnose IBS (2)?

- Flatus – (?exacerbated by high fibre diet)
- History of enteric infection (post-infective IBS)
- Non GI symptoms include urinary disorders, gynaecological symptoms, lethargy, sexual dysfunction, poor quality of life.
- Relation to menstrual cycle
- Examination
 - abdominal tenderness
 - Faecal loading

Tests

- Basic Screen including
 - inflammatory markers
 - coeliac serology
 - TFTs
 - ? Stool culture/OCP
 - Faecal Calprotectin
 - Osocopy
 - >45 colonoscopy including biopsies
 - Younger –
 - Nothing
 - ? Flexible sigmoidoscopy

Treatment

- Positive diagnosis and reassurance
- Dietary
 - Wheat and dairy exclusion for 2 weeks
 - Fibre - careful
 - Soluble
 - Insoluble
 - Low FODMAP

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FOD MAP diet

- Fermentable **O**ligo-, **D**i-, and **M**ono-saccharides, **A**nd **P**olyols
- Oligo
 - ‘fructans’ Fructans-rich foods
 - **wheat (white bread, pasta, pastries, cookies)**
 - **Onions**
 - **Artichokes**
 - other not commonly problematic foods with fructans are **asparagus, leeks, garlic, chicory roots** and **chicory based coffee substitutes**.
 - ***Galactans*** (like stacchiose and raffinose)
 - **soy, beans,**
 - **chickpeas, lentils,**
 - **cabbage and brussel sprouts.**

- ***Di-saccharides***
 - ***Lactose*** (milk sugar).
- **Monosaccharides:**
 - ***Fructose*** (fruit sugar).
 - Honey
 - dried fruits - prunes, figs, dates raisins
 - apples, pears, sweet cherries, peaches, watermelon, papaya
 - Fructose is often added to commercial foods and drinks as **high fructose corn syrup (HFCS)**.

- **Polyols** - artificial sweeteners foods and drinks
 - ***Sorbitol*** may appear in “**sugar-free chewing gum**”, “**low calorie foods**”; naturally it appears in **stone fruits: peaches, apricots, plums**).
 - ***Xylitol*** naturally appears in some **berries**. A pack of chewing gum containing sorbitol or xylitol may cause bloating or diarrhea in a healthy child and especially in persons with fructose malabsorption or SIBO.

FODMAPs fermentable oligosaccharides, disaccharides, monosaccharides and polyols.

- **Fruits:**

- Apples
- Apricots
- Cherries
- Mango
- Pears
- Nectarines
- Peaches
- Pears
- Plums and prunes
- Watermelon

- **Grains**

- Rye
- Wheat

Lactose-Containing Foods

- Custard
- Ice cream
- Margarine
- Milk (cow, goat, sheep)
- Soft cheese,
- Yogurt

Legumes

- Baked beans
- Chickpeas
- Lentils
- Kidney beans

Sweeteners

- Fructose
- High fructose corn syrup
- Isomalt
- Maltitol
- Mannitol
- Sorbitol
- Xylitol

Vegetables

- Artichokes
- Asparagus
- Avocado
- Beets
- Broccoli
- Brussel sprouts
- Cabbage
- Cauliflower
- Garlic (with large consumption)
- Fennel
- Leeks
- Mushrooms
- Okra
- Onions
- Peas
- Radiccio lettuce
- Scallions (white parts)
- Shallots
- Sugar snap peas
- Snow peas

Low FODMAP

- **Fruits**

- Banana
- Blueberry
- Grapefruit
- Grapes
- Honeydew melon
- Kiwi
- Lemon
- Lime
- Mandarin oranges
- Orange
- Raspberry
- Strawberry

- **Sweeteners** - Artificial sweeteners that do not end in -ol

- Glucose
- Maple syrup
- Sugar (sucrose)

- **Vegetable**

Bok choy

- Carrots
- Celery
- Corn
- aubergine
- Green beans
- Lettuce
- Parsnip
- Tomato

- **Grains**

Gluten free products

Spelt products

- **Lactose Alternatives**

Butter

Hard cheese, brie and camembert

Lactose-free products, such as lactose-free ice cream and yogurt

Gelato

Rice milk

Sorbet

Natural Treatments for Irritable Bowel Syndrome

Probiotics

- VSL#3
- Symprove

Aloe Vera juice?

Treatment of IBS

- Anti-spasmodics
 - Peppermint oil capsules
 - Mebeverine/Alverine/hyoscine
 - Buscopan
- Anti-diarrhoeals
 - Loperamide
 - Lomotil
 - Codeine phosphate

Drugs (2)

- Laxatives
 - Fibre (care!)
 - Senna
 - bisocodyl
 - **PEG based**

Drugs (3)

- Antidepressants (or visceral analgesics!)
 - TCAs
 - SSRIs
 - Venlafaxine
 - Citalopram
- Cholestyramine/Colvesevalam
 - SEHCAT scanning
- New drugs
 - Prucalopride (5HT₄ agonist)
 - Lubiprostone (chloride channel activator)
 - Linactolide (gcmp activator)
 - Serotonin modulators (Alosetron Cilansetron Tegaserod)

Treatment of IBS

- Pain

- Antispasmodics
- TCA/SSRI
- Probiotics
- Linactolide

Bloat

- Probiotics
- Linactolide (IBS-C)
- FODMAP diet

Treatment of IBS

- Pain

- Antispasmodics
- TCA/SSRI
- Probiotics
- Linactolide

Bloat

- Probiotics
- Linactolide (IBS-C)
- FODMAP diet
- Rifaxamin

Treatment of IBS

- Constipation

- Osmotic laxatives
- Pruclopride
- Lubiprostone
- Linactolide

Diarrhoea

Fodmap
Loperamide
Codeine Phosphate
TCA
Ondansetron
Cholestyramine
Colvesevalam

CBT (1)

Teach strategies for using the mind to deal with the world in a healthier manner.

- Cognitive
 - Identifying and challenging irrational thoughts
 - Visualisation
 - Calming Self Talk
 - using the imagination to face a fear
 - Thought-stopping

CBT (2)

Behavioral Techniques:

person specific strategies for handling and reacting to situations

- Deep breathing exercises
- Progressive muscle relaxation
- Assertiveness Training
- Desensitization (gradual exposure to something that is feared)

Summary

- Positive Diagnosis
- Judicious investigations
- Individualised treatment
 - Reassurance
 - Non-pharmacological (diet/lifestyle)
 - Pharmacological
 - Psychological



Tim Peckham

What is it like to be a Gastroenterologist faced with an IBS patient?

How should an IBS patient prepare for a Gastroenterologist Consultation?

What should an IBS patient expect as best practice from a Gastroenterologist?

