Managing Irritable Bowel Syndrome (IBS)

Irritable bowel syndrome (IBS) affects more than one in ten people. Little is known about the causes of IBS. It can be worsened by stress or emotional upsets. There may be differences in the symptoms of IBS between patients. This means that, of the many different treatment approaches available, you and your healthcare provider will need to select those that are most likely to help your individual symptoms.

**What nondrug measures can I use?**

Many people say that changing their diet is helpful. Some common culprits thought to make IBS worse are caffeine; alcohol; sorbitol (the artificial sweetener); fried or fatty foods; and gas-forming foods like cabbage, broccoli, or beans. Make sure that, if you do exclude something from your diet, you aren’t risking any type of deficiency (calcium, for example, from eliminating dairy products).

Adding fiber might be helpful for reducing the symptoms of IBS. Soluble fiber is best (supplements like Metamucil and dietary sources like applesauce, oatmeal, potatoes, and rice). Insoluble fiber, like wheat bran, doesn’t seem to work. The downside of fiber is that it can increase your chances of having gas and bloating. Add fiber gradually to reduce these effects.

You may also benefit from eating smaller, more frequent meals. Large meals can sometimes worsen IBS symptoms.

While stress does not appear to cause IBS, it may make the symptoms worse. Some patients have found that techniques to reduce stress or a good exercise program are helpful. There’s no harm in trying, so do what works best for you.

**Are there medications I can take?**

Over the years a number of different medications have been tried for IBS. You should always consult with your healthcare provider before trying any medication, especially nonprescription ones. Listed below are the most commonly used medications for IBS. Some of these medications require a prescription.

**Antidiarrheal agents.** Loperamide (Imodium) can be used for diarrhea, but it doesn’t help with stomach pain and bloating.

*(Please continue to the next page for more treatment options)*
Antispasmodics. Hyoscyamine (Levsin [U.S.]), dicyclomine (Bentyl [U.S.], Bentylol [Canada]), and hyoscine butylbromide (Buscopan [Canada]) can reduce pain and cramping by decreasing muscle spasms in your intestinal tract. They’re especially helpful if your IBS symptoms are worsened by meals. However, antispasmodics may have some unpleasant side effects such as dry mouth, sedation, and constipation.

Laxatives. Osmotic laxatives, like polyethylene glycol or PEG (Miralax [U.S.], Lax-A-Day [Canada]) and milk of magnesia (MOM), can be tried for constipation.

Antidepressants. Antidepressants can reduce IBS symptoms as well as relieve depression and anxiety.

Herbal products. Several products have been tried that are available without a prescription. For example, peppermint oil is an antispasmodic that may help. You should consult with your healthcare provider before trying any alternative medications as these are active compounds and may have other physical effects and drug interactions that need to be considered.

Probiotics. Some probiotics might help with the symptoms of IBS, like bloating and gas. Look for products that contain Bifidobacteria, as this probiotic seems to be the most beneficial. Some products that contain Bifidobacteria include Align (U.S.), Activia (U.S.), Bifidox (Canada), or VSL #3.

Other therapies. Lubiprostone (Amitiza [U.S.]) is a prescription drug that’s helpful for women with IBS who have constipation. Alosetron (Lotronex [U.S.]) is another prescription drug that’s sometimes used in women with severe IBS with diarrhea. These drugs are expensive and have some important side effects, so they are generally used when other treatments have failed.

Where can I go for information?

There are some very good places on the internet where patients with IBS can go to keep up with current information about this disorder. A listing of these sites is given for your reference. Remember to talk with your healthcare provider about any information you find so you can discuss which treatments are best for you.

Source Web Address
International Foundation for Functional GI Disorders www.iamibs.org
The UNC Center for Functional GI and Motility Disorders www.med.unc.edu/medicine/fgidc
The IBS Page www.panic.com/~ibs/
IBS Resource Center www.healingwell.com/ibs/
Canadian Society of Intestinal Research www.badgut.com/

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