

IRRITABLE BOWEL SYNDROME

(Spastic Colon; Mucous Colitis)



BASIC INFORMATION

DESCRIPTION

A functional disorder of the large intestine (bowel). It is not a disease. "Functional disorder" means the bowel doesn't work properly. Irritable bowel syndrome (IBS) can cause a variety of symptoms. Episodes may last for days, weeks, or months. It is not contagious, inherited, or cancerous. It is very common and affects women more than men.

FREQUENT SIGNS AND SYMPTOMS

- Cramp-like pain in the middle or to one side of the lower abdomen. Pain is usually relieved with bowel movements.
- Diarrhea or constipation; usually alternating.
- Swollen or bloated (distended) abdomen and gas.
- Mucus in the stools.
- Straining to have bowel movement.
- Urgency to have bowel movement.
- Feeling that the bowels still have to be emptied after having a bowel movement.

CAUSES

Exact cause is unknown. The nerves and muscles in the bowel seem to be extra-sensitive in people with IBS. Nerves can cause pain and discomfort if they become irritated. Muscles that contract to pass food through the intestines may contract too much and cause cramping and diarrhea. The bowel can overreact to food, stress, exercise, and hormones. Stress may trigger symptoms if you have IBS, but it doesn't cause IBS.

RISK INCREASES WITH

- Under age 35.
- Women more than with men.
- Other family members with similar bowel problems.
- People who have panic disorder, or similar disorders.
- People who have had a history of sexual, physical, or emotional abuse.

PREVENTIVE MEASURES

No specific measures to prevent IBS. After it is diagnosed, you can find ways to help prevent symptoms.

EXPECTED OUTCOMES

The condition is usually recurrent throughout life. Symptoms may be mild to severe and may come and go. Most people can be helped with treatment. No specific treatment works best for everybody. You may need to try more than one to see what works for you.

POSSIBLE COMPLICATIONS

- IBS can affect all aspects of life. It can interfere with work schedules, limit physical activities, disrupt personal relationships, and cause a restricted social life.
- IBS does not cause physical damage to the bowel. It does not lead to bleeding, serious disease, or cancer.



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider may do a physical exam and ask questions about your symptoms and activities. Medical tests may include blood and stool studies, as well as others tests to exclude more serious disorders. A mental health exam may be done also.
- Treatment may involve a combination of diet changes, drugs if needed, and coping with stress.
- Reduce stress in your life. Try various techniques that can help you relax. Meditation, self-hypnosis, or biofeedback may help. Keep a stress and symptom diary so you know who or what may trigger an episode.
- Get counseling for emotional or personal problems.
- Quit smoking. Nicotine may add to the problem.
- Join a support group. This can be reassuring for some.
- To learn more: National Digestive Diseases Information Clearinghouse, 2 Information Way, Bethesda, MD 20892, (800) 891-5389; website: www.niddk.nih.gov/health/digest.

MEDICATIONS

- Antispasmodics to relieve severe cramps and drugs to treat the constipation form of IBS may be prescribed.
- Drugs for depression or anxiety may be prescribed.
- Antidiarrheals or laxatives need to be used with caution. Get medical advice before using them.

ACTIVITY

No limits. Daily physical exercise improves bowel function, keeps you fit, and helps reduce stress.

DIET

- Increase fiber in the diet to promote good bowel function. Add fiber to your diet slowly to give the body time to adjust. Too much fiber can cause gas.
- Avoid foods or drinks that can worsen symptoms. These include fatty foods, milk products, chocolate, alcohol, caffeine, and carbonated drinks. Keep a food diary to help find the foods that cause you problems.
- Avoid large meals, but eat regularly.



NOTIFY OUR OFFICE IF

- If you or a family member has symptoms of IBS.
- Symptoms don't improve despite treatment.

Special notes:

More notes on the back of this page