What is Irritable Bowel Syndrome?
Irritable Bowel Syndrome is a condition that primarily involves the large intestine (colon) and it is thought to be the result of abnormal muscle contractions. Irritable bowel syndrome is also known as IBS, spastic colon, irritable colon and mucous colitis. Normally, regular and coordinated muscular contractions in the wall of the colon help move the stool through your colon and into your rectum. In patients with irritable bowel syndrome (IBS), these muscular contractions are excessive and are not well coordinated.

What causes Irritable Bowel Syndrome?
The exact cause of IBS remains unknown. Some foods may trigger attacks. In addition, stress, anxiety or depression probably also play a role. Finally, alcohol, smoking and caffeine all seem to worsen IBS. While the underlying cause of IBS remains unknown, IBS is not known to lead to any serious, life-threatening illness.

What are the symptoms of Irritable Bowel Syndrome?
The most common symptoms include:

- abdominal pain and cramping, which may be severe
- constipation or diarrhea
- a lot of gas
- bloating
- a feeling of fullness in the rectum

The abdominal pain is frequently relieved by a bowel movement. If diarrhea is present, it typically occurs in the morning or immediately after a meal. There may also be mucous in the stools.

The symptoms of IBS tend to occur regularly anywhere from a few days to several weeks and then, the symptoms may be absent for a period of time, usually for months to years. It is not unusual for the symptoms to recur with varying levels of intensity over long periods of time.

How is Irritable Bowel Syndrome diagnosed?
There is no specific test to diagnose Irritable Bowel Syndrome. Nevertheless, your physician may want to make sure you do not have a more serious disease that might mimic IBS. First, your physician will carefully review your symptoms and perform a physical examination. Based on your history and physical examination, your physician may elect to do no additional testing OR your physician may want to perform

- some blood tests
- a test of your stools to look for blood you cannot see
- a colon x-ray (a barium enema)
- a colonoscopy (a scope that the gastroenterologist uses to look inside your entire colon) or flexible sigmoidoscopy (like a colonoscopy, except the scope is shorter so only the last part of the colon is seen).
How is Irritable Bowel Syndrome treated?
Since IBS is not a life-threatening illness and since IBS has a tendency to be with you for life, it is important that the treatment not do more harm than good. Some interventions that may be helpful, besides medications, include:

- Avoid triggering foods: A food diary may be helpful in identifying foods that worsen your symptoms.
- Increase the fiber in your diet: Usually, fiber helps alleviate some of the symptoms of irritable bowel syndrome. Occasionally, fiber may actually worsen the symptoms of irritable bowel syndrome. If such is the case for you, then you may need to decrease the fiber in your diet.
- Reduce stress: Relaxation or biofeedback techniques may help you manage stress.
- Exercise regularly: Engaging in regular physical activity helps improve the symptoms of irritable bowel syndrome.

In addition, there are a number of medications that may be helpful in controlling the symptoms of irritable bowel syndrome.

MEDICATIONS FOR IBS:
If DIARRHEA is a predominant symptom, then your physician may suggest:
- loperamide (Imodium)
- diphenoxylate/atropine (Lomotil)
- alosetron (Lotronex) This drug (Lotronex) was recently removed for the market due to a rare but significant, life-threatening side effect. There were reports associated with ischemic colitis (a condition where the blood supply to the colon is reduced). Nevertheless, because the drug is very effective in selected patients, the manufacturer will allow some use of this drug as long as the risks and benefits of this drug have been adequately explained to the patient.

If CONSTIPATION is a predominant symptom, then a new drug called lubiprostone (Amitiza) may prove beneficial to you. It is very expensive. Another new drug is called linaclotide (Linzess) may be useful in treating constipation. Its long term affects are unknown. Also, some over the counter agents can be helpful in managing the constipation. Useful agents include Miralax (polyethylene glycol 3350), milk of magnesium and caffeine.

If ABDOMINAL PAIN and/or cramping is a significant symptom, then your physician may try:
- dicyclomine (Bentyl, others). If you also have constipation, this drug may make that symptom worse.
- Hyoscyamine (Levsin, others). Works similarly to dicyclomine but may be preferred in men. Also, seems to work well in patients with symptoms occurring immediately after meals.

If stress, anxiety and depression are playing a role in your symptoms, the class of drugs called Tricyclic Antidepressants (TCA) may prove helpful. Not only do these drugs address stress, anxiety and depression but they also may have beneficial effects on the muscular contractions of the bowel. You may have to take these drugs for several weeks before you notice any effect. Common tricyclic antidepressants that are used for irritable bowel syndrome include
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Amitriptyline (Elavil), desipramine (Norpramin) and imipramine (Tofranil, others). Other drugs used to treat stress and depression may also help in the management of irritable bowel syndrome.

Summary:
While irritable bowel syndrome can be a troublesome disorder that is difficult to control, it does not lead to any life-threatening illnesses. Using the advice provided in this pamphlet in conjunction with direction from your Dubuque Internal Medicine health care team, many of the symptoms of irritable bowel syndrome can be adequately managed. If you have any questions about irritable bowel syndrome, be sure to notify your health care provider.