

# Irritable Bowel Syndrome

Irritable bowel syndrome is considered to be a "functional" disorder of the gastrointestinal tract, which makes it easier to define by describing what it is not. It is not an anatomical or structural defect, and it is not an identifiable physical or chemical disorder. Although it does produce pain, discomfort and inconvenience, in itself it does not adversely affect your physical well-being or longevity.

The bowel spasms do not interfere with the normal physiological process of digestion. Even though it is under a strain, the bowel is doing its job. The fact is, although irritable bowel can trouble a patient for years, it has not been shown to lead to a more serious disease.

## **NORMAL vs. IB**

When the bowel is functioning normally, it produces orderly, gentle muscular contractions, alternating with relaxation, that propel its contents toward the rectum and anus for elimination. In irritable bowel syndrome, the muscular contractions are disorganized, harsh, or spasmodic, resulting in abdominal discomfort and erratic propulsion. Sometimes this causes frequent, occasionally "explosive" elimination of liquid stools; at other times, the bowel spasm delays normal evacuation, causing constipation. Although it seems contradictory, both diarrhea and constipation can be produced by the same basic mechanism in irritable bowel syndrome.

## **CAUSES**

If irritable bowel syndrome is not caused by faulty bowel structure, allergy, disease or infection, what does cause it? Unfortunately, no one has been able to answer this satisfactorily. While inherited sensitivity, several foods and beverages, and various drugs have been implicated as contributing elements, the major aggravating factor appears to be emotional stress and the individual's reaction to that stress. Symptoms can vary considerably from patient to patient, and even from time to time within the same patient. One intestinal specialist concluded recently that the disturbances seen in irritable bowel syndrome are normal bodily manifestations of emotional tension, like sweating, facial flushing, and weeping. However, this does not mean that the symptoms of irritable bowel exactly coincide with emotional stress. Often, they appear later, when the crisis has passed.

## **SYMPTOMS**

*Abdominal Distress:* Abdominal distress can vary from mild discomfort to excruciating pain, usually in the left lower part of the abdomen. Occasionally, the pain seems to spread to the lower back, flanks, and thighs. Nausea may be present, as well as a feeling of fullness, heaviness, bloating, or pressure. Excessive belching and passing gas are typical symptoms and may relieve the pain; gas trapped in the colon can also cause shortness of breath and a feeling of heart "palpitations," which can be alarming.

*Unpredictable Bowel Action:* Diarrhea (either watery evacuation or passage of small, fragmented stools) often alternates with constipation (ranging from difficult, painful passage of hard, pebbly stools to a simple lack of urge to go to the bathroom). The diarrhea-type movements rarely awaken the patient at night and occur most frequently after meals as well as in the early evening.

*Abnormal Stools:* The consistency of stools varies as often as their frequency, with differences in color and texture.

Sometimes, mucus (which is regularly secreted by the normal bowel as a lubricant) is visible in the stool as long, ropy strands that are often mistaken by the patient as intestinal tissue or "worms," which can be disturbing.

## **STEPS TO HELP**

Making an appointment with your primary care provider about your problem is the first step. If you have already been examined, your provider has probably discussed the results with you and has made some recommendations concerning the following:

*Diet:* Many health providers now feel that most patients can eat small amounts of most foods. A regular eating schedule, neither skipping meals nor overeating at one sitting, plus chewing food slowly, has been found to be beneficial. Avoiding swallowing air that could be ingested by chewing gum or drinking carbonated beverages has also been helpful. The addition of bran, whole wheat bread, or other fiber may also be suggested. Daily intake of fiber supplements such as Metamucil or Citrucel can help.

*Putting Your Bowel Habits in Order:* As much as possible, you should take advantage of the bowel's natural tendency to empty itself after the breakfast meal. By the same token, if frequency of movements has been your problem, you should not be upset if you have a movement after any meal of the day.

*Physical Aids:* A few physical aids have been found useful. For example, an electric heating pad or hot-water bottle often relieves painful spasm in the abdomen. Some prefer lying in a tub of warm water. Simple, pleasurable physical activity, such as leisurely walking on a regular basis, for half an hour or 45 minutes a day is often suggested.

*Medication:* A variety of medications and dietary additives are available that can alleviate some of the symptoms. Your health care provider will advise you which ones, if any, you should take.

## **SCHEDULING AN APPOINTMENT**

Call 275-2662 to schedule an appointment at the University Health Service (UHS). UHS offers a full range of services. All visits to UHS are confidential.

## **LINKS**

To learn more about Irritable Bowel Syndrome, you can visit:

MedlinePlus - Interactive site  
<http://www.nlm.nih.gov/medlineplus/tutorials/irritablebowelsyndrome/htm/index.htm>

Medline Plus  
<http://www.nlm.nih.gov/medlineplus/ency/article/000246.htm>

University of Maryland Medicine  
<http://www.umm.edu/altmed/ConsConditions/IrritableBowelSyndromecc.html>

Better Health Channel  
[http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Irritable\\_bowel\\_syndrome](http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Irritable_bowel_syndrome)

Adapted from: "To the Patient with Irritable Bowel Syndrome- It's Not Just in Your Head," by SmithKline & French Laboratories - Division of SmithKline Corporation.