Does stress cause IBS?

Stress does not cause IBS. However, strong emotions, such as anxiety or stress, can affect the nerves of the bowel in susceptible people and make IBS worse. Learning to reduce stress can help. With less stress, you may experience less cramping, pain and easier symptom management. Meditation, exercise, relaxation therapy, hypnotherapy, behaviour therapy and counseling can help. You may need to try different activities

If you are very anxious, depressed or are having trouble sleeping, you need to discuss these problems with your doctor. Some people with IBS have suffered a great deal of emotional stress, such as sexual abuse or the death of a parent, in the past. This may need to be dealt with before the physical problems improve.



Can IBS cause another disease?

No. IBS cannot become another disease such as bowel cancer.It occurs in one in 18 men and one in 26 women in their lifetime, so if you are concerned about this, discuss it with your doctor. People with IBS report more headaches, period pain, fibromyalgia and urinary symptoms. The reason for this is not clear.



Can IBS be cured?

No. You and your doctor will be able to develop a lifestyle programme and perhaps a treatment plan to control your symptoms when need be. You are not alone.

Dr. Rela Institute & Medical Centre is a multi-specialty quaternary care hospital located in Chennai, India.

The Institute is within the campus of Sree Balaji Medical College and Hospital, which is spread across 36 acres. It has 14 operating theatres with 450 beds, inclusive of 150 critical care beds.

The Institute is conveniently located 10 minutes from the Domestic and International Airport.

The hospital is designed to provide highly specialized care in various departments with a focus on multiorgan transplantation. Prof. Mohammed Rela, a world renowned surgeon in the field of Liver surgery and transplantation is the Chairman and Managing Director of the Institute

In addition to quaternary & quality care, is also committed to provide day to day primary and secondary care to the local population, with facilities of international standards.

The Institute would provide comprehensive support to international patients travelling for medical treatment such as language assistance, stay, visa and travel.

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Irritable Bowel Syndrome (IBS)



What is Irritable Bowel Syndrome (IBS)?

Irritable bowel syndrome (or IBS) affects the colon, or large bowel, which is the part of the digestive tract that stores stool (poo). People with IBS appear to have sensitive bowels that are easily 'upset'.

IBS is a very common problem. One in five people have the unpleasant symptoms of IBS at some time. It is more common in women, often comes on in the late teens or early twenties and may come and go over a person's life. Symptoms are often more troublesome before a woman's period.



What are the symptoms of IBS?

The main symptoms of IBS are:

- Abdominal pain or discomfort that is often relieved by passing wind or faeces
- o Stomach bloating
- Chronic diarrhoea or constipation, or alternating between the two Irritable Bowel Syndrome (IBS)



Do you have a good diet?

Aim to eat the following amounts of these food groups each day:

- Brown or wholemeal breads, high fibre cereals, rice, pasta, legumes: 4 or more serves
- Dairy products: 3 serves
- o Fruit: 2 or 3 pieces
- Vegetables: 5 serves
- Meat, cheese, poultry and fish: 1 or 2 serves AND drink 8 glasses of water, teas or juices per day

Other symptoms are:

- ${\bf \circ}$ Whitish mucus in the stool/poo
- ${\bf \circ}$ The feeling that you have not finished a bowel movement
- Nausea

IBS can be painful, however, it does not damage the colon or other parts of the digestive system. IBS does not lead to other health problems.



What symptoms are not due to IBS?

Bleeding from the back passage, weight loss, fever or severe diarrhoea at night are not due to IBS. If you have these problems further tests will be necessary.



What causes IBS?

No one knows the exact underlying cause of IBS. The symptoms may be due to increased sensitivity to the function of the bowel. This can be responsible for discomfort, and abnormal contractions in the bowel muscle.

Certain factors can 'trigger' attacks in susceptible individuals. These include:

- Infection An episode of gastroenteritis may result in persistent bowel symptoms. The cause is unknown, but may involve changes to nerve function in the bowel or changes in the normal bacterial population of the bowel.
- Food intolerance Impaired absorption of lactose (a sugar found in dairy and many processed foods), fructose or sorbitol (an artificial sweetner) may trigger IBS.
- General diet Low fibre diets can exacerbate constipation in some with IBS.
- Stress Strong emotions, such as anxiety or stress, can affect the nerves of the bowel in susceptible people.
- Medications Certain medications (such as antibiotics, antacids and painkillers) can lead to constipation or diarrhoea.



How is IBS diagnosed?

If your symptoms are typical, you may not need any tests at all.

Diagnostic tests will be required if you are over 40 years old when you develop symptoms, if you have a family history of bowel cancer or if it is suspected that your symptoms are caused by other illness such as coeliac disease (intolerance to gluten), inflammatory bowel disease, diverticulitis or polyps. These tests may include:

- Full medical check-up
- o Blood tests, including blood tests for coeliac disease
- \circ Simple stool/pootest
- Investigation of the bowel lining by inserting a small tube (sigmoidoscopy)

• Investigation of the bowel under sedation (colonoscopy) or barium enema, if necessary.



How do you treat IBS?

Discussions between you and your doctor can help decide the appropriate treatment plan for your specific needs.

Different treatments work for different types of IBS.

Avoiding individual triggers can help many people with IBS. Others choose to take medications at times when their IBS is 'playing up'.

- Anti-diarrhoeal agents (e.g. Imodium, Lomotil, fibre supplements) can be an essential part of management in those with diarrhoea-predominant IBS
- Pain-relieving medications (e.g. opiates such as codeine) can provide effective pain relief. One of their most common side effects, constipation, may also relieve the diarrhoea of diarrhoea-predominant IBS. Pain relief may also be obtained
- Constipation treatments (e.g. fibre supplements or laxatives) may provide relief for constipation predominant IBS
- Antispasmodic agents (e.g. mebeverine, belladonna, hyoscine and peppermint oil capsules) may ease cramping
- Tricyclic antidepressants can be effective in treating the pain of IBS, but are best prescribed for a trial period with monitoring of symptoms. Use of these medications does not mean that IBS is caused by depression
- Establishing eating routines and avoiding sudden changes of routine.



Is my lifestyle causing IBS?

You need to be aware of your diet, exercise habits and how much alcohol or coffee you drink. Sometimes smoking can make the problem worse.

As a guide, aim to have a serving of high-fibre breakfast cereal every morning, at least 5 servings of fruit and vegetables throughout the day, three servings of dairy foods which contain calcium, as well as six to eight glasses of water, teas or juices per day. Note: People with lactose intolerance, who can't digest

Approximately 30 grams of fibre per day is recommended. If your diet is low in fibre you should try to gradually increase it with high fibre foods. If you introduce fibre too quickly it can