



Irritable bowel syndrome is a **chronic disorder** of the **gut-brain interaction**. While there is **no organic cause** of IBS, the pain patients experience is real and should be acknowledged. The prevalence of IBS in North America is 10-15%.

RISK FACTORS

- Stressful life events, especially in early life
- Bacterial infections in the digestive tract
- Mental health conditions such as anxiety and depression
- Family history of IBS

PRESENTATION

- Abdominal pain, may be relieved with a bowel movement
- Constipation and/or diarrhea
- Bloating
- Gas
- Mucous in stool
- May have abdominal tenderness on exam

RED FLAGS ALTERNATIVE DX

- Blood in stool
- Weight loss
- Nocturnal diarrhea
- Fever
- Poor growth
- Iron deficiency anemia
- Family history of inflammatory bowel disease or celiac disease



INVESTIGATIONS rarely required but considered if red flags or history/physical exam suggest alternative diagnosis

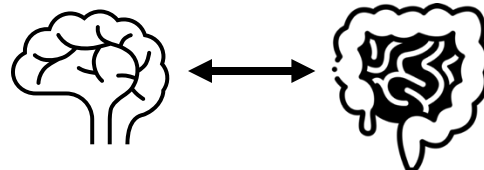
- CBC
- Fecal calprotectin
- Tissue transglutaminase IgA
- TSH
- Stool culture for microorganisms



POTENTIAL PATHOPHYSIOLOGY

Potential pathophysiology is **multifactorial** and may include:

- Gastrointestinal motility:** increased frequency and irregularity of contractions, prolonged transit time, increased motor response to CCK
- Visceral hypersensitivity:** increased perception to distention and bloating
- Intestinal inflammation
- Postinfectious
- Alteration in fecal microflora
- Bacterial overgrowth such as small intestinal bacterial overgrowth
- Food sensitivity
- Genetics



DIAGNOSIS

The diagnosis of IBS is a clinical diagnosis. The following Rome IV Criteria for IBS must be present:

- Abdominal pain (≥ 1 day per week during the previous 3 months) plus ≥ 2 of the following:
- Abdominal pain related to defecation
- Change in stool frequency
- Change in consistency of stool

MANAGEMENT

Dietary Changes

- Increase water-soluble fibre
- Avoid trigger foods
- Try a low FODMAP diet

Stress Management

- Coping strategies
- Mindfulness
- Distraction
- Managing existing mental health conditions

Physical Activity

- 60 minutes moderate to vigorous activity 3 times per week
- Strengthening activities 3 times per week

Medications

- PEG for constipation

Other remedies

- Data inconclusive
- Probiotics
 - Peppermint oil capsules

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