

Gastroenterology Department

Information about Irritable Bowel Syndrome (IBS)



What is Irritable Bowel Syndrome? (IBS)

Your GP has referred you to the hospital for symptoms that sound like Irritable Bowel Syndrome (IBS). IBS is a long-term condition of the digestive system. It is very common and affects around 5-11% of the population (5-11 out of 100 people). More females are affected than men. IBS is not associated with an increased risk of more serious gastrointestinal problems.

IBS can be referred to as a “functional gut disorder” or a “disorder of gut-brain interaction”. In IBS the function of the gut and the nerves supplying the gut are not working as expected. It is also believed that there is an imbalance of the friendly bacteria within the gut.

The cause is poorly understood but can be associated with stress, anxiety and other conditions such as fibromyalgia and interstitial cystitis. In about 25% of cases (1 out of 4 people) IBS develops after a gut infection.

Symptoms of IBS

The symptoms of IBS vary between individuals and affect some people more severely than others. The most common symptoms are:

- Constipation, diarrhoea or both
- Bloating which usually increases through the day
- Flatulence (wind)
- Mucus in your bowel movement (poo)
- Urgent need to open your bowels
- Feeling your bowel is not empty after a bowel movement
- Abdominal discomfort
- Increase in symptoms after eating

Symptoms not typical of IBS

- Blood in your bowel movement (poo)
- Weight loss that was not intentional
- Bowel movements through the night
- Incontinence of bowel movement (being unaware of the passage of poo)

If you have any of the symptoms which are not typical of IBS please contact your GP.

Management of Symptoms

Most patients diagnosed with IBS will have the condition for life and no treatments provide a “cure”. However you can manage your symptoms by making changes to your lifestyle and diet. Medications may also help. It is often necessary to try more than one combination of treatments to find what is most helpful for you.

- Eat regular meals i.e. breakfast, lunch and an evening meal
- Try not to skip meals or eat late at night
- Take time to sit down and eat, chew well and try not to rush
- Regular exercise such as walking, running, exercise classes or yoga can help with stress and IBS symptoms
- Reduce fatty foods and manufactured foods such as fried food, take away food, pastries and pies, crisps and cakes. These foods can worsen IBS symptoms and you should try to avoid or limit these.
- Many people find certain foods will make their symptoms worse. Keep a food and symptom diary for 2-4 weeks – remember symptoms may not be caused by the food you have just eaten, but what you ate earlier that day or the day before
- Alcohol can make IBS symptoms worse. Limit alcohol to no more than 14 units a week and spread this out over 3 or more days
- Aim to drink at least 8 cups or glasses (2 litres) of fluid a day and limit fizzy juice, tea and coffee to 3 drinks per day

Additional help for symptoms of constipation:

- Increase fibre intake gradually as your bowel needs time to adapt. Choose wholegrains (such as wholemeal bread and wholegrain cereals) and increase your fruit and vegetable intake. Avoid eating extra wheat bran
- Oats and golden or brown linseeds can help soften stools and also help with symptoms of bloating and wind. You can add linseeds to smoothies, yoghurts or sprinkle them on salads. You can grind them down or eat whole. A tablespoon of linseed a day is a good target. Aim to drink a small glass (150ml of fluid) with each tablespoon of linseeds.

Additional help for symptoms of diarrhoea:

- Drink plenty of non-caffeine containing fluids, e.g. water, diluting juice
- Some sweeteners can cause diarrhoea. Avoid sorbitol, mannitol and xylitol which is found in sugar free sweets, slimming products and chewing gum
- Try reducing high fibre foods (such as wholegrain cereals and breads) and choose white bread, refined cereals, pasta and rice

Additional help for symptoms of bloating and wind

- Reduce the amount of processed foods in your diet e.g. microwave meals, part-cooked breads
- Introduce oats and linseeds (see constipation advice)
- Reduce gas producing foods e.g. beans, broccoli, cabbage, cauliflower, sprouts, sugar free confectionary

Probiotics

Some people with IBS find that probiotics help their symptoms although there is little evidence to support this for all people. There are many probiotics available. These come in various forms e.g. drinks, tablets and granules. **These are food supplements**

therefore not available on prescription. If you choose to take a probiotic you should follow the manufacturer's instructions and take it for at least 4 weeks. If there is no benefit you could try another type or brand.

Low FODMAP approach (fermentable oligosaccharides, disaccharides, monosaccharides and polyols)

This approach involves restricting your intake of foods which contain fermentable oligosaccharides, disaccharides, monosaccharides and polyols and then reintroducing them gradually. If you have tried the other dietary and lifestyle advice mentioned within this booklet but still find your symptoms troublesome, then help is available from the community dietitians who have the expert knowledge to support you with this treatment option. Speak to your GP to discuss a referral to the Dietetic Service if you wish to try this option.

Lactose intolerance

Some people with IBS symptoms feel benefit from removing lactose containing foods from their diet. This could be included as part of a low FODMAP approach to manage your IBS symptoms.

There is no reliable "test" for lactose intolerance offered on the NHS. Blood and skin testing can often produce false results. The best way to make the diagnosis is to exclude all dairy (lactose containing) products from your diet for a 4 week period and see if your symptoms improve.

Lactose is found in many foods. It is a sugar found in cows' milk therefore you should avoid milk, ice-cream, butter, yoghurts, milk chocolate, cheese and cream. As dairy products are a source of calcium you must make sure that you are still getting enough calcium. There are many 'dairy products' on the market which have had the lactose removed.

Medications

Your doctor may prescribe some medications to relieve your symptoms such as anti-spasmodics, anti-depressants, anti-diarrhoeal drugs or laxatives.

Some of these can be bought over the counter such as Mebeverine and Buscopan (which can be very useful for pain or altered bowel habit), and peppermint oil capsules (which can be helpful if you experience bloating). We suggest trying each medication for at least a few weeks as it can take some time for them to reach maximum effect. You may wish to try the alternative medications if the first does not help.

It is unusual for medications to be helpful alone without the lifestyle and dietary changes outlined above.

For further advice on medications, speak to your local community pharmacist.

Summary

This leaflet tells you about Irritable Bowel Syndrome (IBS) and will help you to manage your symptoms.

If you have tried all the advice within this leaflet and feel you require further information or you remain concerned about your condition, please phone us on the number on the covering letter and we will arrange an appointment for you. Normally this will be with a specialist nurse and may be a virtual (video or telephone) appointment.

Further Resources

Please consider having a look at these websites for further information and support regarding IBS:

- **NHS Inform:**
<https://www.nhsinform.scot/illnesses-and-conditions/stomach-liver-and-gastrointestinal-tract/irritable-bowel-syndrome-ibs>
- **NHS Patient Webinars:**
<https://patientwebinars.co.uk/condition/ibs>
- **The IBS Network:**
<https://www.theibsnetwork.org>
- **The British Dietetic Association:**
<https://www.bda.uk.com/resource/irritable-bowel-syndrome-diet.html>
- **Guts UK:**
<https://gutscharity.org.uk/advice-and-information/conditions/irritable-bowel-syndrome/>

