Management of IBS (Irritable Bowel Syndrome)

Management Options

Brief Decision Aid

There are four options for the management of IBS:

- **Simply understanding the diagnosis** and what is happening to your body.
- **Making changes to eating habits** - fibre, drinks, and patterns of eating.
- **Using medications** - treating the various symptoms.
- **Trying treatments working on MIND and BODY together**.

**Note**: IBS has variable symptoms - sometimes management requires using several options together. We know that different treatments suit different people. It has not always been possible to put exact figures to the likelihood of different options because good quality research does not exist. It is often helpful to keep a diary of symptoms and work through options logically so you can find out for yourself what works best for you.

In making a decision you need to ask yourself - What is important to me? This leaflet and your health professional can tell you the evidence and give their suggestions but you need to make a decision that is right for you. What are your preferences?

You may want to think about:

- What do I feel about changing diet - will it be easy?
- What about lifestyle changes - can I make them happen?
- Will I remember to take medication?
- Do you want something just when you are badly affected, or all the time to help try and prevent symptoms?
- Is any one treatment known to be more effective than another?
- Are there any underlying issues in my life that might be playing a part in my symptoms?

**Benefits and risks of understanding the diagnosis**

<table>
<thead>
<tr>
<th>Treatment Option</th>
<th>Benefits</th>
<th>Risks or Consequences</th>
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</thead>
<tbody>
<tr>
<td>Reading the full Patient UK condition leaflet.</td>
<td>Simply increasing your understanding of IBS can ease symptoms.</td>
<td>Causes of IBS are often mixed.</td>
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<tr>
<td>Talking about the connections between mind and body.</td>
<td>Being less anxious may help ease symptoms.</td>
<td>Simply understanding the diagnosis does not always help.</td>
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<td></td>
<td>Knowing it is not a more serious condition such as cancer may help anxiety and so ease symptoms.</td>
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<td>Knowing that it is NOT all in your mind, and that it is not your fault may help you to get better.</td>
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**Benefits and risks of changes to eating habits**

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</thead>
<tbody>
<tr>
<td>Fibre</td>
<td>Can help some people and reduce symptoms. Widely available in</td>
<td>Will make some people worse - although symptoms return to</td>
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</table>
the type of fibre seems to make a difference.

Soluble (dissolves in water) fibre such as ispaghula is probably best, e.g. Fybogel

food - oats, nuts and seeds and some fruit and vegetables (check if soluble fibre or not).

You can get fibre preparations on prescription.

May be more effective if constipation is part of your IBS normal if you stop the fibre. Does not help everyone.

Eating Habits - food, drinks and diet

Eating as regularly as possible and not eating too much fruit, caffeine, fizzy drinks and sorbitol (sweeteners).

Trying yoghurts containing probiotics.

Increasing exercise.

Avoiding certain foods helps some people.

You should have a blood test to make sure you are not intolerant to gluten (this is Coeliac disease).

There is evidence that changes to eating habits may help some people.

Often these changes may also help in other ways - such as in helping you lose weight and lowering cholesterol.

You need to be careful to set about changing your diet in an organised way otherwise it can be very difficult to be sure what is helping or what is making things worse.

<table>
<thead>
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<th>Benefits and risks of medications</th>
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<td><strong>Treatment Option</strong></td>
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<tr>
<td><strong>Antispasmodics - if pain is a problem</strong></td>
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<tr>
<td><strong>Laxatives - if constipation is a problem</strong></td>
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**Anti-diarrhoea medications - if loose stool is a problem**

Such as loperamide.

- The medications are flexible - you can take them regularly or just when you have loose stools.
- Can take it in advance of a time when you feel your stools might be loose.
- Will certainly help some people reduce the number of loose stools they pass each day.

**Drugs that work on nerves to reduce pain and gut movement**

Such as TCA anti-depressants like amitriptyline.

- Works best if pain and diarrhoea are your main symptoms.
- You do NOT need to be depressed or anxious for this treatment to be effective.
- Anti-depressants are NOT addictive, you can always stop and the dose that is effective is often quite low.
- They may help sleep.

**Benefits and risks of treatments working on BODY and MIND together**

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| **Focusing on the links between the body and the mind.** 
The relationship between mind, brain, nerve signals and increased activity of the bowels is complex. 
A variety of therapies have been shown to be helpful, such as relaxation techniques, hypnotherapy, Cognitive Behavioural Therapy (CBT). | 30-50 people in 100 having hypnotherapy can expect significant improvement. 
Often more beneficial when it is clear to you, and to your clinician, that psychological factors DO seem to play a part in your IBS. 
May sometimes offer a more permanent solution and improve other aspects of health such as fibromyalgia, because you are not just treating the symptom. 
Sometimes has benefits beyond the bowel symptoms, particularly if there is anxiety and/or depression in addition to the IBS. | 50-70 people in 100 will NOT benefit from hypnotherapy. 
Some treatments may not be available or may be restricted to those people with more severe or long standing problems. 
They often require both time and ‘homework’ from you. |

**Brief Decision Aids** are designed to help you answer three questions: Do I have options? What are the benefits and risks of these options, (and how likely are they)? How can we make a decision together that is right for me?