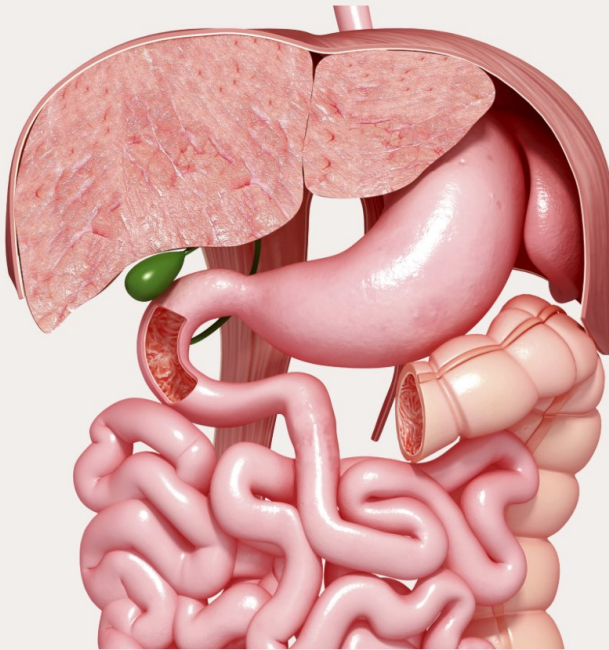




Internal Medicine



Topic : IBS Notes
Done by : Johainah Taha

Irritable Bowel Syndrome (IBS)

Definition

- A group of functional bowel disorders characterized by chronic abdominal complaints without an identifiable structural or biochemical cause. *↳ everything looks normal.*
- Major health problem with gastrointestinal (GI) symptoms.
- Unknown cause, though multiple factors may contribute.
- Affects 15–20% of adults in industrialized countries. *in Jordan 40% of GI visits are due to IBS.*
- More frequent in women.
- Diagnosed primarily using Rome IV criteria.

Diagnosis of IBS

Rome IV Criteria

- Clinical criteria were updated to highlight that abdominal pain may worsen or improve with defecation.
- **Diagnosis is based on:**
 - Clinical history
 - Physical examination
 - Minimal laboratory tests
 - Colonoscopy (when necessary) *→ only if he has red flags*

Rome IV diagnostic criteria for IBS subtypes

BS subtype	Bristol stool forms 1 & 2	Forms 6 & 7
IBS-C	>25%	< 25%
IBS-D	< 25%	>25%
IBS-M	>25%	>25%
IBS-U	Bowel habits cannot be accurately characterized	

IBS symptoms related to bowel habit abnormalities can only be confidently established when the patient is evaluated off medications used to treat bowel habit abnormalities. From Lacy BE, Mearin F, Chang L, Chy WD et al. Bowel Disorders. Gastroenterology 2016;150:1393-1407

Red Flags (Alarm Features) Requiring Further Investigation

Feature	Reason for Concern
Age > 50 years	Increased risk of serious conditions like colorectal cancer
Male gender	IBS is more common in women, so symptoms in men may warrant further evaluation
Unexplained weight loss	Potential sign of malignancy or other serious conditions
Nocturnal symptoms	Organic disease is more likely if symptoms occur at night
Family history of colon cancer	Increased risk for colorectal malignancies
Anemia	Could indicate chronic blood loss or malabsorption
Rectal bleeding	Suggests an organic cause such as inflammatory bowel disease or cancer

Alarm Features Considered Potentially Relevant in the Diagnosis of Organic Disease as Opposed to IBS

History

- Blood in the stool
- Chronic diarrhea
- Family history of colon cancer, IBD, or celiac disease
- Fever
- Onset after age 50 years
- Night-time symptoms (awakening the patient from sleep)
- Progressive dysphagia
- Recurrent vomiting
- Short history of symptoms
- Travel history to locations endemic for parasitic diseases
- Weight loss

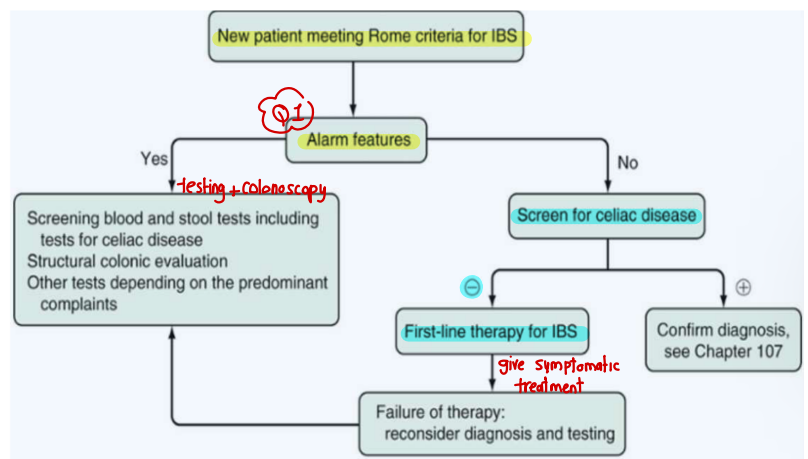
Physical Examination

- Abdominal mass
- Arthritis (active)
- Dermatitis herpetiformis or pyoderma gangrenosum
- Overt blood or mass on rectal examination
- Signs of anemia
- Signs of intestinal malabsorption
- Signs of intestinal obstruction
- Signs of thyroid dysfunction

Think of secondary causes before saying that this is an IBS.

Symptoms of IBS

Symptom	Description
Abdominal pain/discomfort	Often relieved or worsened by defecation
Bloating	Sensation of abdominal fullness
Mucus in stools	Seen in some IBS cases
Altered bowel habits	<u>Diarrhea</u> , <u>constipation</u> , or alternating between both
Psychological symptoms	<u>Depression</u> , <u>anxiety</u> , <u>stress</u>



* if the symptoms were acute then this isn't an IBS.
 ↳ Should be Chronic

Subtypes of IBS

Type	Bowel Habit
IBS-D	Diarrhea-predominant
IBS-C	Constipation-predominant
IBS-M	Mixed (alternating diarrhea & constipation)
IBS-U	Unclassified

*Supporting diagnostic features:

- Symptoms > 6 months.
- frequent consultation for non-GI problem.
- Previous medically unexplained symptoms
- Stress worsen the symptoms.

Subclassification of Patients

Symptoms	IBS-D	IBS-C
Fewer than 3 bowel movements per week	✗	✓
More than 3 bowel movements per day	✓	✗
Hard or lumpy stools	✗	✓
Loose or watery stools	✓	✗
Urgency	✓	✗
Feeling of incomplete bowel movement	✓	✓
Passing mucus during bowel movements	✓	✓
Abdominal bloating or swelling	✓	✓

Pathophysiology: Role of Serotonin in Gut Function: it's the major gut hormone.

- IBS may involve serotonin imbalances affecting:
- GI motility (altered bowel movements).
- Pain perception (hypersensitivity to gut stimuli).
- Brain-gut communication.
- Serotonin helps soften stools by promoting water release.

معظم الأدوية تحاول تشويف Serotonin → ex: prucalopride → constipation.

Management of IBS → depends on Symptoms

① General Management Strategies

- Patient reassurance.

② Dietary modifications:

- Wheat-free, lactose exclusion, and low-FODMAP diet, Gluten

③ Psychological interventions (for refractory cases):

- Cognitive Behavioral Therapy (CBT), relaxation techniques, gut-directed hypnotherapy.

→ use Amitriptyline 10-25 mg at night.

Pharmacologic Therapy

Symptom	First-Line Treatment	Additional Options
Abdominal pain	Anticholinergics (e.g., dicyclomine)	Low-dose tricyclic antidepressants
Diarrhea (IBS-D)	Dietary changes, fiber	Loperamide, diphenoxylate, alosetron, eluxadoline
Constipation (IBS-C)	Dietary fiber, osmotic laxatives	Lubiprostone, linaclotide, plecanatide, <u>prucalopride</u>
Severe IBS cases	Psychological therapy	Hypnotherapy, cognitive behavioral therapy

IBS-Specific Medications

Medication	Mechanism	Indications
Lubiprostone (8 µg BID)	Type 2 chloride channel activator	IBS-C (women ≥18 years)
Linaclootide (290 µg QD)	Guanylate cyclase C agonist	IBS-C
Plecanatide (3 mg QD)	Guanylate cyclase C agonist	IBS-C
Alosetron	5-HT ₃ antagonist	IBS-D (restricted due to side effects)
Eluxadoline	Mu-opioid receptor agonist	IBS-D

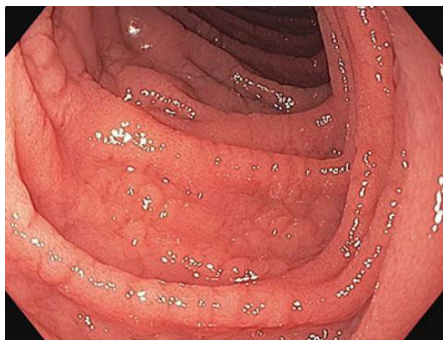
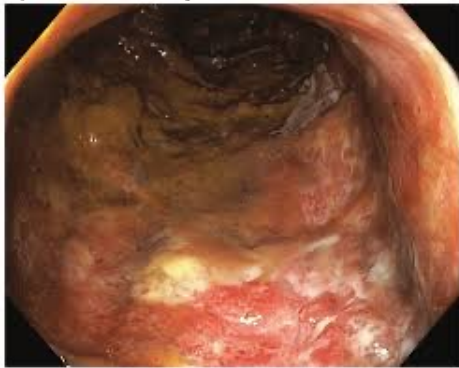
Adjunctive Therapies

- **Probiotics:** Beneficial effects on global IBS symptoms. (على مرأى من العالم)
- Peppermint oil: Anti-spasmodic, but may cause GERD symptoms.
- Rifaximin, mesalazine, ketotifen: Considered in select cases.

Key Takeaways

- IBS is a chronic functional disorder with no structural or biochemical cause.
- Diagnosis relies on clinical criteria (Rome IV) rather than specific tests.
- Symptoms include abdominal pain, bloating, and altered bowel habits.
- Subtypes: IBS-D, IBS-C, IBS-M, and IBS-U.
- Serotonin imbalance plays a key role in gut motility and pain perception.
- Management includes dietary changes, psychological support, and targeted medications.

Extra Pictures :



→ Celiac disease.