

Patient leaflets from the BMJ Group

Irritable bowel syndrome

Irritable bowel syndrome (IBS) is very common. In the UK, more than 1 in 5 women and 1 in 10 men have it. If you have IBS, it makes sense to talk to your doctor, because there are treatments that can help.

We've looked at the best and most up-to-date research to produce this information. You can use it to talk to your doctor and decide which treatments are right for you.

What is it?

If you have IBS, your bowels don't work properly. You may get stomach pain, cramps, bloating, constipation or diarrhoea.

Doctors think that you get IBS when your brain sends the wrong messages to your bowels. This could happen when you're feeling stressed. That doesn't mean IBS is just in your mind. Signals from your brain cause real, physical changes in your body. But it explains why your mood or emotions can affect your IBS.

What are the symptoms?

IBS affects people in different ways. But everyone gets pain and discomfort. You may also have either diarrhoea or constipation, or bouts of both. You may sometimes feel bloated.

Lots of people get stomach problems from time to time. But if you have IBS, you'll get them more often than most people. You may have IBS if you've had any of these symptoms for at least six months:

- Changes in your bowel habit (for example, you get diarrhoea or constipation)
- Pain or discomfort in your abdomen
- A bloated feeling.

IBS doesn't lead to more serious illnesses. But problems in your bowels can happen for other reasons. Make sure you see a doctor if you get blood in your stools, lose weight for no reason or feel tired all the time.

What treatments work?

Many people with IBS try to cope with it themselves. But it can make a big difference if you talk to your doctor. A good relationship with your doctor can help you to find the best treatment for your symptoms.

Medicines

There's some research to show that **anti-spasmodic drugs** can help with IBS, especially if your main symptom is pain. These drugs work by relaxing the wall of your bowels.

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Some examples are dicycloverine (brand name Merbentyl), mebeverine (Colofac), and hyoscine (Buscopan). You can buy some anti-spasmodic drugs yourself from a pharmacist. Some come combined with a fibre supplement. One brand that includes fibre is Fybogel Mebeverine.

People often take anti-spasmodic drugs for a week or so at a time when their IBS gets bad. It's better to take these tablets when your symptoms flare up, rather than taking them every day.

Anti-spasmodic drugs don't usually cause serious side effects. In some studies, people who took anti-spasmodic drugs didn't get any more problems than people who were taking a dummy treatment (a placebo). However, some people who take dicycloverine or hyoscine do get side effects, including constipation, nausea, and an irregular heartbeat.

Peppermint oil works in the same way as anti-spasmodic drugs. There's not much research on it, but it may help you get less pain and bloating. You can buy peppermint oil capsules from a pharmacy. Some brand names are Colpermin and Mintec. You should swallow the capsules whole, with water. If you chew them they can irritate your mouth. Peppermint oil sometimes causes heartburn as a side effect.

Some **antidepressants** seem to help with IBS. Your doctor may suggest an antidepressant if you have bad IBS and other treatments haven't helped you.

About 6 in 10 people with IBS are helped by antidepressants. You need to take them every day. You won't feel the benefits for at least two or three weeks.

Doctors prescribe antidepressants at a lower dose for IBS than for depression. So there may be fewer side effects. Most of the research has looked at older antidepressants called tricyclics. About half the people who take them get a dry mouth. Some people also get constipated or feel dizzy.

There's good research that a drug called **loperamide** (Imodium) can help get rid of diarrhoea. You can buy it yourself from a pharmacy. You may find loperamide useful when you get diarrhoea. But there's no good-quality research looking particularly at whether it helps people with IBS. Some people get side effects from loperamide. These include dizziness, drowsiness, and bloating.

If your main problem is constipation, you may want to try eating more fibre or taking fibre supplements. We talk about these below. You could also try a laxative to help you go to the toilet. To read more, see our information on constipation.

The foods you eat

For some people, **a change of diet** may help with IBS. But it's a good idea to check with a doctor or a dietitian before you make any changes to your diet. Avoiding particular foods can make your life difficult, and it's easy to miss out on important nutrients. The best advice may be the simplest. Try to eat small, regular meals and a balanced, healthy diet.

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About 1 in 10 people with IBS have problems digesting dairy products (which contain lactose) like milk or cheese. This is called lactose intolerance. Unfortunately, avoiding foods with lactose in them doesn't usually cure IBS.

If you're constipated, you may benefit from **eating more fibre**. Fibre is a bulky substance that your body can't digest. The extra bulk helps make your stools large and soft, and helps your bowels work properly. Wholegrain or wholemeal foods, cereals with bran in them, vegetables, and fresh or dried fruits are all good sources of fibre. You can also get fibre supplements from chemists or health food shops. Some examples are ispaghula husk (brand names include Fybogel and Isogel) and methylcellulose (Celevac). Make sure you drink plenty of water if you're taking fibre supplements.

Some people find that cutting down on tea, coffee or alcohol helps their symptoms. Drinking more fluid may help with constipation.

Some people try **probiotic supplements**, such as yoghurts that contain 'friendly bacteria'. The idea is that these add to the normal bacteria that live in your bowels. But there hasn't been enough research to say whether they work.

Other treatments

Because IBS is linked to stress for some people, treatments to help you relax might work. A therapist can teach you **relaxation techniques** in just a few sessions. You can also get books, tapes, or CDs on relaxation. Learning yoga or meditation may also help.

Some therapists use **hypnosis** as a way of helping you relax. While you're in a relaxed state, your therapist helps you focus on your symptoms and what you can do about them. There's some research to show that hypnotherapy might help, but it can take up a lot of time and can be expensive.

Some people try **acupuncture**, which involves an acupuncturist inserting thin, sterile needles through the skin at certain points. But the research on acupuncture hasn't been very good, so we can't say whether it might help.

Cognitive behaviour therapy is a talking treatment (a psychotherapy). It aims to help change the way you think about your illness and give you more control over it. A few studies have found that it can help people get fewer symptoms of IBS. But there's not enough research to say for certain.

What will happen to me?

Your symptoms may improve in time, but irritable bowel syndrome doesn't usually go away on its own. You may be reassured to know that IBS doesn't damage your bowels or lead to more serious illnesses. How badly it affects you depends largely on whether it stops you doing the things you want to do.

Learning about your IBS may help you feel more in control and manage your symptoms better. Joining a support group may help. Your doctor may be able to recommend one in your area.

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