

## Background information on THE GUT TRUST & IBS

### **IBS: what it is**

Out of every 10 people you know, at least one has Irritable Bowel Syndrome (IBS). They suffer from pain, bloating, diarrhoea and constipation, a need to go to the toilet at such short notice that sometimes they soil themselves, restricted diets, along with the mental pain and depression that having a chronic and embarrassing illness brings.

IBS is the name doctors give to a collection of unexplained symptoms relating to a disturbance of the large bowel, including:

- cramping abdominal pain
- diarrhoea, constipation or a combination of the two
- bloating and excess wind
- urgency and incontinence
- pain in the rectum

Symptoms frequently occur elsewhere in the body, including: headaches, dizziness, backache, passing urine frequently, tiredness, muscle and joint pains, nausea, anxiety and depression and so on.

IBS is more than 10% of the workload of gastroenterologists in the UK.

### **Those affected**

We may all have some symptoms at some time. At any one point, between 10 and 20 percent of people living in Western countries fulfil the diagnostic criteria for IBS. It is more frequent in younger people and the middle aged (less in old age) and more women than men are diagnosed. It is more common in Western countries than in the developing world.

In its severest forms, IBS affects people's ability to work or to unemployment, an inability to participate fully in social, leisure and sporting events that others take for granted and, in some cases, result in people being afraid to leave their own home. The levels of stigma, embarrassment and low self-esteem are also factors. It is estimated that more than 30% of people with chronic IBS consider suicide because of their symptoms.

### **The causes**

There is no one particular cause. It is commonly associated with emotional tension, triggered by life changes, difficult life situations or stressful events. Often people with IBS will have experienced more traumatic events or stressful situations in their childhood or adult life than other people. Emotional stress, anxiety and fear are known to sensitise the gut, making it more reactive.

Many people with IBS are intolerant to a range of common foods. It is possible that it is not so much the food that causes the problem but rather the sensitive gut that is overreacting

to its contents. As emotional tension further sensitises the bowel, intolerances may come and go depending on how the patient feels. Dietary management of IBS often needs to be combined with counselling.

A small proportion of people develop IBS after a bout of gastroenteritis, which indicates that gastroenteritis may make the gut more sensitive. Recent research suggests that many people with IBS have chronic low grade inflammation of the small and large intestine.

## **Diagnosis and treatment**

The Gut Trust strongly recommends that anyone who believes they may have IBS should visit a doctor in the first instance. A number of other conditions and diseases (such as Crohn's disease, diverticulitis, coeliac disease and cancer of the colon) have similar or overlapping symptoms and these should be ruled out before a diagnosis of IBS is made.

Diagnosis is made with X-rays, blood tests, examination of stools, endoscopy and other tests. If the results do not reveal any obvious abnormality, IBS is indicated. It is often called a 'functional disorder' of the bowel, in other words, an illness associated with a disturbance of bowel function without any change in structure or obvious cause.

There is no cure for IBS. It is one of those illnesses that may come and go according to what is happening in the person's life. However, once diagnosis of IBS has been confirmed, the doctor can prescribe drugs to offset the form of the condition: antispasmodics to ease pain, laxatives for constipation and binding treatments to aid diarrhoea. Low doses of antidepressants can be effective, especially when pain is the main feature. An appropriate diet can help as may complementary therapies from properly registered practitioners, including relaxation techniques, meditation and hypnotherapy.

Advice and support also plays a positive role.

## **The Gut Trust**

The Gut Trust is the only charity in the UK dedicated to supporting people with IBS, providing emotional and practical support. It works with bodies such as the National Health Service, the Department for Work and Pensions and the National Institute for Health and Clinical Excellence, as well as university research teams and the private sector, in order to challenge the taboos about bowel illnesses while providing advice that people need and understand.

It works for its members in many ways by providing:

- a dedicated full time membership officer
- self-help groups in 14 locations across the UK
- a free telephone advice line staffed by specialist nurses providing support and advice
- access to befrienders
- access to the Trust's unique, comprehensive Self Management Programme
- fact sheets and a regular journal, Gut Reaction
- an extensive website
- an email discussion forum
- a Can't wait card

The Gut Trust is also playing a major role in advising the National Institute of Health and Clinical Excellence in drawing up national guidelines for the diagnosis and treatment of IBS in primary care (GP) settings. The Trust is also active in a project on 'Improving Management in Gastroenterology', funded by the Health Foundation.

In addition, the Trust has its own campaign 'Can't Wait, Won't Wait', concerning easy access to public toilets, so important to the lives of people with IBS.

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