

Irritable Bowel Syndrome

All children and teens have occasional stomachaches, diarrhea, or constipation. If these symptoms occur regularly and start to interfere with your child's life, the doctor may make a diagnosis of irritable bowel syndrome. This is a "functional" disorder, which means it has no recognizable cause and no lasting health effects. Although there is no cure for irritable bowel syndrome, treatment can help to reduce symptoms.

What is irritable bowel syndrome?

Irritable bowel syndrome (IBS) is a common chronic disease causing abdominal pain, gassiness and bloating, and constipation or diarrhea. It may also be called "spastic colon."

IBS is a "functional" disorder. This means that the symptoms result from some change in the way the stomach and intestines work rather than any specific physical problem. Your doctor usually will diagnose IBS after examination and tests to make sure there is no other, more serious cause of his or her symptoms.

IBS can be difficult to live with, and there is no specific cure. However, it causes no permanent damage. Symptoms may improve with simple treatments, such as avoiding certain foods and using medications when needed. Although stress doesn't cause IBS, managing stress can help to reduce symptoms.

What does it look like?

- Stomach pain, especially cramps. Pain happens frequently, not just occasionally.
- Bloating.
- Diarrhea or constipation may happen at different times. Abdominal pain may seem to get better after a bowel movement.
- Abdominal pain and constipation/diarrhea interfere with normal activities. Your child may start missing school or social activities or avoid going to places where no bathroom is available.
- The usual symptoms of "stomach flu" are absent, such as fever, vomiting, and dehydration.
- Your child may be anxious or worried, especially if abdominal symptoms have been present for some time. Usually, symptoms must be present for 3 months or longer before the diagnosis of IBS is made.

What are some possible complications of irritable bowel syndrome?

- There are no physical complications.
- Effective treatment can reduce the impact of IBS on your child's school and social life.

What puts your child at risk of IBS?

- Little is known about the risk factors for functional disorders such as IBS. If you or other members of your family have similar bowel problems, your child may be at higher risk.
- Girls and boys are at similar risk. (In adults, IBS is more common in females.)
- Although stress doesn't cause IBS, high stress levels may contribute to symptom flare-ups. Children with IBS have increased rates of anxiety and depression.

Can IBS be prevented?

- There is no practical way to prevent IBS.
- Good treatment, including diet changes and stress reduction, may lessen the impact of IBS on your child's life.

How is IBS treated?

Proper diagnosis is an important first step in recognizing and treating IBS. After initial examination, your doctor may recommend a visit to a specialist in stomach and intestinal disorders (a gastroenterologist) for further evaluation and treatment. Many children with IBS (and their parents) are relieved to find out they do not have a serious physical problem.

There is no specific test for IBS. The diagnosis is based on your child's symptoms and how frequently and regularly they occur.

There is also no specific cure for IBS, but various treatments may be helpful:

- Some simple *diet changes* may help to control IBS symptoms:
 - If there are foods that seem to make your child's symptoms worse, avoid them. Keeping a food diary may help to identify the foods that cause problems.
 - Make sure your child gets plenty of fiber, including fresh fruits and vegetables and whole-grain breads, and plenty of liquids. This helps to avoid both constipation and diarrhea. Your doctor may recommend a fiber supplement, such as Metamucil.

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- It may help your child to eat frequent, smaller meals.
- *Stress reduction* can help in living with the symptoms of IBS. Lower stress levels can also help to reduce the frequency and severity of symptoms:
 - Try not to let the symptoms interfere much with your child's life. Simply knowing that the symptoms aren't caused by a serious disease may help to reduce stress.
 - Encourage your child to resume regular school and social activities.
 - Encourage your child to engage in regular exercise and relaxation techniques.
- *Medications* may be helpful but generally should be used only for short periods. Your doctor may recommend certain medications, including:
 - Antispasmodics (drugs to reduce stomach cramps).
 - Medications for diarrhea.
 - Laxatives, especially bulk laxatives that work by adding extra fiber (such as Metamucil). Avoid stimulant laxatives.
 - Antidepressants.

- *Dealing with chronic pain.* Techniques may include relaxation therapy, biofeedback, evaluation by a pain medicine specialist.
- Treatment for anxiety or depression, if present.
- *Medical follow-up* is an important part of treatment for IBS. Your doctor will likely recommend regular visits to check for improvement or any other change in your child's condition.

It sometimes takes a while to determine the best combination of treatments for a patient with IBS. The goal is to minimize your child's symptoms and their impact on his or her life as much as possible.

When should I call your office?

During treatment for IBS, call our office if there is any sudden or significant change in your child's symptoms, especially:

- Black, tarry-looking bowel movements.
- Vomiting.
- Weight loss.