



## Understanding **IRRITABLE BOWEL SYNDROME** with **CONSTIPATION (IBS-C)**

### *What is Irritable Bowel Syndrome with Constipation (IBS-C)?*

Irritable Bowel Syndrome (IBS) is a common chronic gastrointestinal disorder that involves problems with motility (how the bowel moves contents through our intestines) and sensitivity (how the brain interprets pain sensations in the bowel). Those affected by IBS may experience recurrent abdominal pain and irregular bowel patterns that are often painful. Symptoms are often chronic and intermittent and may last for months or years.

Constipation occurs when digested food moves slowly through the digestive tract. As a result, stool remain in the large intestines for prolonged periods of time where the intestines remove excess water causing stool to become hard, dry, lumpy and difficult to pass.

Irritable Bowel Syndrome with constipation, also referred to as IBS-C, is a distressing condition that can significantly affect the quality of life of those affected.

Canada has one of the highest rates of IBS-C in the world.

### *What are the symptoms of IBS-C?*

When living with IBS-C, symptoms may suddenly worsen (flare) and then improve for no apparent reason. When symptoms flare, they may be severe, debilitating and last for days or months.

Possible signs and symptoms of IBS-C are:

- abdominal pain or discomfort
- gas, bloating and abdominal distention
- straining when having a bowel movement
- a sense that something is blocking your rectum
- infrequent bowel movements (less than three per week)
- feeling like you have not completed your bowel movement

### *Possible causes IBS-C*

The cause of IBS-C is not yet known; however, there are a variety of factors that may contribute to the disorder.

These include:

**Intestinal motility:** The walls of the intestines are lined with layers of muscles that contract and relax in a coordinated rhythm as they move food from your stomach to your intestines through a process called peristalsis. For those with IBS-C, contractions within the intestine may be reduced or delayed causing gas, bloating and stool to move slower than normal.

**Nerve Hyper-Sensitivity:** Poorly coordinated signals between the brain and the gut can make your body overreact to the activities taking place during digestion causing increased sensitivity. This may explain why those with IBS-C experience abdominal pain and discomfort.

**Excess fluid absorption:** Constipation results when the intestine absorbs too much fluid from the stool, which can occur because of reduced or delayed contractions.

**Brain-bowel connection:** There is a strong connection between our brain and bowel. This is sometimes called the brain-gut connection. In individuals with IBS-C, a possible disconnect or miscommunication between the mind and gut, may impact motility, pain sensitivity and fluid absorption. This disconnect may result in abdominal pain, discomfort and constipation.

### *How IBS-C is diagnosed*

The exact cause of IBS-C is not known and there is currently no test to diagnose the syndrome. Physicians make a diagnosis based on your history, symptoms and physical exam. You may also be asked to have tests that diagnose

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other illnesses so that those can be ruled out.

There are two sets of diagnostic criteria for IBS-C which are used after other conditions have been ruled out. These are the Rome and Manning criteria.

**Rome criteria:** To fit this criteria, patients must have experienced abdominal pain and discomfort that lasts for at least three days in a month in the last three months, and experiences two or more of following:

- symptom improvement after a bowel movement
- change in frequency of stool
- change in stool consistency

**Manning criteria:** To fit the Manning criteria, patients are asked if they experience:

- pain linked to frequent bowel movements
- looser stools associated with pain
- pain is relieved by a bowel movement
- significant abdominal bloating
- when having a bowel movement, feeling the bowel movement is unfinished or incomplete more than a quarter of the time
- diarrhea with mucus more than a quarter of the time

The more symptoms the individual has, the greater the likelihood that IBS-C will be diagnosed. The hallmark symptom of IBS-C is abdominal pain.

### Treating IBS-C

It is important to find a solution that works best for you so you can find relief and enjoy the best quality of life possible despite IBS-C. Your healthcare provider will try to help you manage your symptoms. Recommendations generally begin with changes to lifestyle and diet. If those changes do not bring relief, over-the-counter (OTC) products or prescription medications may be prescribed.

#### Lifestyle Changes

Sometimes making simple changes to your lifestyle can be helpful for managing mild IBS-C symptoms such as:

##### *Increasing your activity level:*

Regular exercise not only increases your strength, it can also boost bowel activity.

##### *Incorporating strategies that support general well-being:*

- Get enough rest. This allows your body to maintain basic

function, repair and manage stress.

- As already mentioned, stress can affect bowel function. Try to find ways to manage your stress at home, work or school through good time management practices and prioritizing your health,
- Limit alcohol consumption
- Don't smoke

#### Dietary Changes

Some foods support good bowel health while others can increase constipation. It is important to recognize the impact certain foods have on your digestive and overall health. Below are a few suggestions that may be helpful:

*Reduce gassy foods:* If bloating is bothersome or you are passing more than usual amounts of gas, your doctor may suggest eliminating trigger foods such as: carbonated beverages, greasy, fried foods, and refined sugar.

*Increase fluids:* Try to consume adequate amounts of non-caffeinated, low sugar liquids each day. Healthy fluids include water, juices, milk and low sodium soups. Avoid liquids high in refined sugar or artificial sweeteners.

*Increase Soluble fibres:* Soluble fibres are derived from plants and cannot be broken down or absorbed. This fibre attracts water and turns into gel during digestion, slowing digestion and making stools soft and easy to pass.

*Increase Insoluble fibres:* Insoluble fibres are not broken down or absorbed by the digestive system. These fibres add bulk to stool, which helps move stool through the digestive tract.

*Explore a Low-FODMAP Diet:* Some individuals are sensitive to types of carbohydrates such as fructose, fructans, lactose and others. These are called FODMAPs (fermentable oligo-, di-, and monosaccharides and polyols). FODMAPs are found in certain grains, vegetables, fruits and dairy products.

#### Medications

While lifestyle and dietary changes can play a role in helping manage mild IBS-C symptoms, if your symptoms do not improve or even worsen, you may require further intervention. Over the Counter (OTC) and prescription therapies are available for treating IBS-C. OTC medications are recommended for short term/occasional use. If your symptoms are still unresolved, you should consult with your health care provider. With the right medication, you should

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find relief and prevent IBS-C from inhibiting your everyday activities and quality of life.

*OTC therapies include:*

*Osmotic laxatives* are non-stimulant laxatives that draw water into the colon, increase bowel movements and allow stool to pass through the colon more easily.

*Bulk-forming laxatives* are non-stimulants containing fibre. Fibre brings water into the colon, softens and increases the bulk of stool, and softens stool. Psyllium or methylcellulose are the most common bulking laxatives used.

*Stool softeners* are non-stimulants, which soften the stool by reducing surface tension and allowing intestinal fluids to penetrate the stool to make it softer and easier to pass.

*Stimulant laxatives* stimulate the nerves and muscles of the intestine to trigger a bowel movement by increasing contractions of muscles in the intestine. This helps stool pass through the colon more quickly.

Some IBS-C patients do not find relief with lifestyle and diet changes nor over the counter medications. These individuals need safe and effective long-term therapies. There are currently two classes of prescription medications that may help. These are:

*Prokinetic agents* which stimulate movement and contractions of the bowel. This increases the speed with which stool travel through the digestive system, increases frequency of bowel movements, and reduces IBS-C symptoms.

*Prosecretory and analgesic agents* increase the amount of fluid in the digestive tract as well as reduce the sensitivity of pain nerves in the intestines. They have been shown to soften bowel movements and make them occur more often, reduce the amount of bloating and to decrease abdominal pain in patients with IBS-C.

### Risks associated with IBS-C

If left untreated, IBS-C can potentially lead to additional health complications. These include:

- *Hemorrhoids*: enlarged veins (blood vessels) in the rectum that may bleed or descend through the anus
- *Anal fissure*: a crack in the lining of the anus caused when large or hard stools stretch the anal sphincter
- *Fecal impaction*: a mass of hard stool that cannot be excreted by a normal bowel movement and may need to be removed manually
- *Rectal prolapse*: rectal tissue pushes out through the anus
- *Lazy bowel syndrome*: caused from frequent use of laxatives to have bowel function properly

### When to see a healthcare provider

It is important to see a healthcare provider if you do not find relief from persistent symptoms, have an on-going persistent change in bowel habits, or if new symptoms develop. It is important to have these investigated as they may be signs of a more serious condition.

Symptoms that may indicate a more serious condition include:

- Rectal bleeding
- Abdominal pain that progresses or occurs at night
- Weight loss

### Preparing for your appointment

Good communication with your doctor is an important part of managing your digestive health, regardless of your diagnosis. To ensure that all doctors have the most accurate information about you, it's a good idea to keep a journal in which you:

- Write down the symptoms that are bothering you, and how long you have had them.
- Write down key personal and medical information, including any recent changes or stressful events in your life.
- Jot down triggers (such as food, stress, activity, or menstrual cycle) that seem to make your symptoms worse
- Make a list of the medications you are taking, including the condition for taking them; this should include any nonprescription medications, probiotics or herbal preparations you may use. Also, note if any of your medications seem to affect your symptoms.
- Create a list of the health-related questions you would like your doctor to answer during your appointment.

If you have an iPhone or Android smartphone, you can easily track your symptoms and create reports for your doctor using the FREE CDHF Gi BodyGuard smartphone app.

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### Partnering for best health

Working collaboratively with your health care professional will help you protect your body from digestive diseases and maximize your digestive health. When you report your health status completely, concisely and accurately, your physician can provide you with the best care and treatment plan. Be sure to stay informed on ways to maintain your health and well-being, track and record your symptoms, and write down questions and concerns to discuss at your next appointment.

### Learn more about IBS and Constipation

The Canadian Digestive Health Foundation provides information, tools and support to help you take control your digestive health with confidence and optimism. Visit [www.CDHF.ca](http://www.CDHF.ca) to view free recorded on-line seminars, read personal stories and access other helpful resources. Watch our information videos on:

#### Understanding Your Options: Managing Chronic Constipation

Dr. David Armstrong presents an informative and amusing overview of constipation. Watch and listen as he explains the constipation, its causes, tests you might need and available treatment options.

[www.CDHF.ca/ManagingConstipation](http://www.CDHF.ca/ManagingConstipation)

#### Living Positively with IBS (Irritable Bowel Syndrome)

In this presentation, Dr. Stephen Vanner helps you better understand IBS, its symptoms, what IBS is not, factors that affect the syndrome, tests you may need and how to best manage your symptoms.

[www.CDHF.ca/LivingPositivelyIBS](http://www.CDHF.ca/LivingPositivelyIBS)

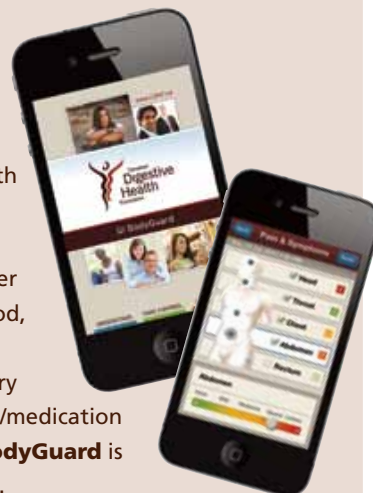
### CDHF App helps track information

The CDHF has developed a smart phone app for iPhone and Android called

#### **Gi BodyGuard**

to help you quickly, easily and privately track and share your digestive symptoms with your physician.

**Gi BodyGuard** has a built-in symptom tracker (stool, pain, blood), food, fitness and medication trackers, a health history form and appointment/medication reminders. Using **Gi BodyGuard** is quick, easy and private.



As well, **Gi BodyGuard** lets you produce comprehensive reports so you can share important information with your physician during your next appointment. You can download **Gi BodyGuard** for free at:

[www.CDHF.ca/GIbodyguard](http://www.CDHF.ca/GIbodyguard)

**Please note:** The information contained in this digestive disorder guide is not a substitute for medical care and the advice of your physician. There may be variations in treatment that your physician may recommend based on your individual facts and circumstances. Always consult with your physician when you have concerns about your health.

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TAKE CONTROL.

LIVE BETTER.

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- ☐ \$ 250 ☐ \$ 100 ☐ \$ 75 ☐ Other \$ \_\_\_\_\_ per month

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- ☐ Please send me information about protecting and improving  
my digestive health.

Over 20 million Canadians suffer from  
digestive disorders every year. The Canadian  
Digestive Health Foundation believes this is  
unnecessary and unacceptable.

We reduce suffering and improve quality of  
life by empowering Canadians with trusted,  
up to date, science-based information about  
digestive health and disease.

As the Foundation of the Canadian  
Association of Gastroenterology, we work  
directly with leading physicians, scientists,  
and other health care professionals to help  
you understand and take control of your  
digestive health with confidence and optimism.

Through research and public education, we  
aim to:

↓ **REDUCE**  
the incidence  
and prevalence of  
digestive disorders

↑ **IMPROVE**  
understanding  
of digestive  
health issues

♥ **SUPPORT**  
those suffering  
from digestive  
disorders

+ **ENHANCE**  
quality of life for  
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### *Request for support*

The Canadian Digestive Health Foundation  
is a national charity governed by a volunteer  
board of directors. We rely on donations from  
the public and the generosity of our partners  
to develop and deliver our programs. Please  
consider including our Foundation as one of  
your chosen charities.

### *Contact us/Donate to*

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