IBS in Children: Advice and Information for Parents

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Irritable Bowel Syndrome in Children

There is not enough information on irritable bowel syndrome (IBS) in children and teens.

If your child has IBS, you probably have many questions, including if your child is the only one, causes, diagnosing IBS in children, and how it is treated.

Prevalence

One study from the *Baylor College of Medicine, Houston, Texas*, finds up to 17% of school-age children have recurrent abdominal pain (RAP.)

RAP is an abdominal pain with no explanation that continues and interferes with daily activities. At least 65% of these children meet the criteria for IBS and have symptoms of abdominal pain that interfere with daily life.

Another study – this one from *Connecticut Children's Medical Center, Hartford Connecticut*, finds 14% of high school students and 6% of middle school students have IBS. The researchers further note that girls and boys are equally affected.

Causes of IBS in Children

The exact cause of IBS is unknown but a popular theory is that people with IBS have colons that are more sensitive and reactive. As a result, the bowels respond strongly to any stimuli and the nerves control digestive are sluggish.

Other theories as to why some children experience IBS symptoms are:

- Problems with the way food moves in their digestive systems
- Stress
- Too much bacteria in the bowel

Any one of these factors can bring about symptoms. Therefore, it is important to reassure your child his or her symptoms are real.

IBS tends to run in families and several studies have found more than one close family member has IBS. One study out of the *Gastroenterology Department, University Hospital L. Sacco-Milan, Italy*, finds IBS is three times more likely in siblings.

Symptoms of IBS in Children

The symptoms of IBS in children include abdominal pain or discomfort and abnormal bowel habits.

Other symptoms include:

- Pain that is dull, achy or sharp
- Pain that has no specific pattern but is triggered by stress and eating, and is relieved with a bowel movement
- Diarrhea
- Constipation
- Alternating diarrhea and constipation
- A feeling that a bowel movement isn't complete
- Abdominal bloating

Diagnosis

In ascertaining a diagnosis, a doctor will make a diagnosis with a complete physical exam and medical history, including symptom and family history.

Your child's doctor will also ask about other GI (gastrointestinal) disorders, recent infections, medications and stressful events that have led up to symptoms.

Your child's doctor may order:

- Lab tests to for anemia, infection, or illnesses that cause inflammation
- A urine analysis to check for urinary tract infections
- Stool samples to look for bacteria and parasites and microscopic blood
- Lactose intolerance testing
- Abdominal x-rays and ultrasounds
- Endoscopy to examine the digestive tract
- Colonoscopy to examine the large intestine

A diagnosis is made when the physical exam, blood work, and other testing reveal no other possible causes of your child's symptoms if your child has experienced symptoms more than once per week for a period of at least two months, and your child is otherwise healthy.

Treatment

Your child's doctor will determine a treatment plan based on:

- Your child's age and overall health
- Extent of symptoms
- Your child's tolerance for medication and specific therapies
- Your opinions, preferences, and expectations

The main goal of IBS treatment for your child will be to manage symptoms so he or she can have a close to normal life as possible. Specific treatments include diet changes, medications, and management of triggers and stress.

Diet Changes

Your child's doctor may suggest smaller meals more often as larger meals may cause cramping and diarrhea. Smaller meals may also help minimize symptoms.

Eating meals low in fat and high in carbohydrates (rice, pasta, cereals, fruits, and vegetables) can help minimize your child's symptoms. Eliminate foods high in fat, those containing caffeine and sugar and that cause gas.

Dietary fiber may also lessen constipation but it is wise to check with your child's doctor before going this route.

Medicine

If your child has severe symptoms, he or she may need medicine to manage these. Your child's doctor will pick a medication based on your child's symptoms.

You should never give your child any medication unless his or her doctor has informed you to do so.

Fiber supplements, laxatives, antidiarrheals, antispasmodics, and antidepressants are all medicinal options for treating IBS in children.

- Fiber supplements and laxatives help treat constipation, whereas antidiarrheals reduce diarrhea symptoms.
- Antispasmodics help control colon muscle spasms and abdominal discomfort.
- Antidepressants in low doses may help to relieve abdominal pain, improve mood and sleep and adjust responses of the GI tract.
- Probiotics may be recommended, either in the form of dietary supplements or through diet, as probiotics can be found in some foods, including yogurt. Some research has shown probiotics are effective in improving symptoms of IBS.

Managing Stress and Other Triggers

Talk therapy and hypnotherapy are two ways a therapist can help your child to manage stress and other triggers with the goal of improving IBS symptoms.

Talk therapy includes relaxation and other stress management practices. Hypnotherapy may help relax the muscles in the colon.

Helping Your Child

There is no cure for IBS, but you can help your child by making sure IBS does not affect their daily routine.

You can help your child by:

- Focusing on their overall health
- Taking them to regular doctor visits
- Making appropriate changes to their diet and lifestyle
- Keeping track of their symptoms and triggers
- Making sure your child is getting enough rest and sleep
- Being supportive and advocating for your child

Children can have normal lives even while living with IBS. But it is important for them to have a trusted adult to provide necessary emotional support and to talk to about their condition and ways to cope.

Support groups are also a good way for children and their parents to connect with others, struggling similarly, find better ways to manage symptoms, feel better and have a positive outlook on life.