



What IBS Treatment Options Are Available?

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IBS Treatment Options

You've been suffering from bowel problems for months or maybe even years, and your doctor has said it's irritable bowel syndrome (IBS)... so what's next? In an ideal world, the treatment for IBS would be one specific drug or one specific diet – and this would be a concise article – but unfortunately, that's not the case.

Unlike disorders such as celiac disease, where a gluten-free diet is all you need, the treatment route for IBS is much murkier. One doctor might recommend a medication, another might urge you to try a new diet, whereas a third might concentrate on relaxation and reducing stress.

The truth is that we all have to find an IBS treatment route that works for us and our own specific situation. The good news is that in 2018 there are a range of products, diets and lifestyle changes that can ease your pain.

Prescription Medications for IBS

In recent years there have been a handful of drugs developed solely for IBS, but they have had a difficult, sometimes dangerous, history.

Prescription Constipation and Diarrhea Medications

Lotronex worked very well for a lot of people with IBS-D but was withdrawn because of serious side effects. It was reintroduced in a more restricted form and can be prescribed only to women who have not gained relief from other treatments and understand the potential risks. Zelnorm was a drug for IBS-C, but it has also been withdrawn, except in emergency or life-threatening situations.

Three more prescription drugs for constipation-predominant IBS are available – Linzess, Amitiza, and Trulance – but be aware that Linzess (linaclotide) comes with a black box warning that it should not be used in people under 18 because of a risk of dehydration. Over 10 percent of people taking Linzess will also experience diarrhea.

Enteragum is known as a medical food rather than a drug and works only with the digestive tract. It can help to control IBS-D, abdominal discomfort and bloating and comes as a fine powder that is dissolved in liquids or mixed into soft foods.

Antidepressants

A low dose of an antidepressant can reduce pain in particular and depending on the drug prescribed, can help either diarrhea or constipation.

You might be worried about taking these drugs, especially if you're offered a drug like Prozac which is so famously linked to mental health, but a prescription for one of these medications does *not* mean your doctor

thinks you have a psychological problem; they are genuine treatments for IBS.

Elavil is often prescribed to patients who experience bad stomach pains and Zoloft, Paxil and Effexor are also used for IBS.

Antispasmodic

“Antispasmodic” is the name used for any drug that relaxes the smooth muscles of the colon, preventing the spasms of IBS and generally calming down hyperactive bowels. They’re not particularly strong drugs, so they may not work for severe symptoms, but some people do find them helpful.

Bentyl is one of the more popular antispasmodics, containing dicycloverine (also known as dicyclomine). Hyoscyamine is also pretty popular and is found in the drugs Levsin and Levbid.

If you’ve been plagued with diarrhea since having your gallbladder out, you may be prescribed a drug that binds the leftover bile acids that can cause loose bowels. Welchol, Colestid, and Questran all do roughly the same thing to control these acids.

Over-the-Counter Relief for IBS Treatment

A wide range of IBS products are available over-the-counter. If you’re watching the pennies always check to see if there is a cheaper, generic version available – look for the Equate brand to save money on a range of products like Imodium and Colace.

When comparing the prices check that the active ingredient is the same medicine in the same dosage and then check that no nasties are hiding in the inactive ingredients – artificial sweeteners, for example, which can have unwanted laxative effects. (Or wanted laxative effects, if you have IBS-C!)

Laxative Pills

Most people think of products like Exlax (sennosides) and Dulcolax (bisacodyl) when they think of laxatives, but these products may not be the best solution for IBS sufferers as they are what are known as “stimulant” laxatives which stimulate the muscles of the bowel to move things along faster.

For sensitive IBS intestines, this process can cause pain, and it may be difficult to find the right dosage to relieve constipation without tipping over into diarrhea. (Dulcolax products are sold with the tagline “gentle, dependable relief,” but I’m afraid I’ve heard from many IBS sufferers who would argue with the “gentle” part!)

Stool Softners

A better bet may be to try stool softeners. Products like Dulcoease and Colace contain docusate sodium which can soften hard stools without that harsher stimulation effect.

The advantage of stool softeners is that they have a more gentle action, but the disadvantage is that they often take longer to work: from one to three days in most cases, whereas stimulant laxatives are usually taken at bedtime to work the next morning.

Next page: more over-the-counter IBS treatment options, and more.

Drinkable Powders

Miralax (polyethylene glycol) has become extremely popular in recent years. It comes in a white powder that dissolves quickly in water or juice.

When you drink the powder, the Miralax is not absorbed into the body, but instead stays in the gut and draws in water, therefore softening the stools and making them larger. (This kind of laxative is called “osmotic” because of its ability to attract water.)

It’s also available in sachets that contain a single dose which are useful if you’re traveling or need to take a dose at work.

Magnesium Hydroxide

Milk of magnesia has been around for so long your great-grandparents might have used it, but sometimes the old remedies are still the best! Commonly sold under the brand name Phillips, this product contains magnesium hydroxide which is another osmotic laxative.

It is generally gentle and is often taken at bedtime to work overnight. The original version has a rather chalky taste, so if you find it unpleasant try the flavored versions in cherry or strawberry or use the chewable tablet version instead.

Anti-Diarrhea Medicines

The most commonly-used anti-diarrheal is Imodium (loperamide) which slows down digestion so that more water can be absorbed from the stools. It’s widely available in capsule form and can also be bought in a soft gel form. Liquid Imodium is available in mint flavor and can be helpful if you want to increase or reduce your dosage very gradually.

Imodium Instants dissolve in the mouth without any extra water needed so are perfect for use when you’re out of the house. A final version (Imodium Multi-Symptom Relief) contains the additional ingredient simethicone which works to break up bubbles of gas and may help to reduce that bloated feeling and stop wind.

Pepto-Bismol contains a different drug (bismuth subsalicylate) and is recommended for diarrhea, indigestion, heartburn, and nausea. It’s most well-known form is as a bright pink liquid, but you can also buy it in tablet, caplet and chewable forms. (It even comes in a bubblegum format for kids!) Check the labels carefully when you’re buying it as the Ultra version is twice as strong as the regular one.

Fiber Supplements

Products like Metamucil and Citrucel can be beneficial because they bulk up the stool and soften it all at once, which can be helpful for both constipation sufferers with hard bowel movements and diarrhea sufferers who need more solid stools.

There are so many different types on the market you might need to try a few before finding your favorite. The most common active ingredients are psyllium husks, methylcellulose, and acacia fiber but other types are available containing various plant and natural fibers and a few synthetic ones as well.

Watch out for added ingredients as some companies add in laxatives to fiber products which you may not want. If you find the powder versions unpleasant to taste, use capsule versions or try Benefiber which should dissolve completely.

It’s usually a good idea to start on a small dose and gradually work your way up to the dose recommended by the manufacturers, as increasing your fiber intake suddenly can cause bloating and gas. Take these supplements with plenty of water, drink plenty more water throughout the day and don’t exceed the recommended dose as too much fiber can cause as many problems as too little.

Using Natural or Home Remedies as an IBS Treatment

Studies have shown that peppermint oil can be helpful in calming an irritated gut. It should be taken in capsules

that have an “enteric” coating – this means that the capsules stay intact when they’re in the stomach and only break down and release the peppermint when they reach the intestines where the product is needed most. Heather Van Vorous is an IBS sufferer and sells a suitable product called Heather’s Tummy Tamers which also contain fennel and ginger.

Iberogast is a liquid blend of nine herbs that has been manufactured since the 1960s and is popular in Europe. It includes chamomile, licorice, and peppermint and is advertised as a treatment for all the standard IBS symptoms of constipation, diarrhea, pain, etc. Flaxseed is sometimes recommended for constipation. It can be found either as a ground version or in whole seeds; both of these can be sprinkled on cereal or yogurt.

If constipation is a problem, a number of vitamins and minerals have laxative side effects that you can take advantage of. Vitamin C taken in high doses can have this effect, as can magnesium tablets in a range of forms including citrate and oxide. (Magnesium citrate in a tablet is *not* the same as liquid magnesium citrate, which is a strong laxative used to empty the bowel before a colonoscopy completely and not for regular use.)

At the opposite end of the scale, if diarrhea is your biggest issue then try a calcium supplement; one common brand is Caltrate Plus, but there are plenty of others available. Calcium carbonate is generally considered the most constipating form of calcium, so try other forms like citrate and gluconate if your diarrhea is relatively mild. The best dosage for both magnesium and calcium when taken for IBS is around 200-450mg per day.

Diet and IBS

I would highly recommend seeking advice from a professional dietician before starting any diet. Not only will they help you choose the best diet to begin with, but they will also help you avoid some common mistakes and pitfalls. (This advice is particularly important to follow if you have suffered from an eating disorder or have other medical issues to consider.)

The FODMAPs diet, for example, often confuses people because it is not one fixed diet that should be followed strictly for the rest of your life. Instead, you start by avoiding a list of high FODMAP foods, but within a few weeks or months you reintroduce different groups of foods, keep a record of how they affect you and end up with a personalized diet plan that works for your own individual symptoms.

A gluten-free or dairy-free diet may be easier to try as long as you study ingredients labels carefully and make sure you know where these products can hide – gluten is found in everything from chips to sausages these days. Gluten is a protein contained in wheat, barley and rye.

Next page: More information on using diet as an IBS treatment, and lifestyle changes for people living with IBS.

Diet and IBS

Many sufferers try a form of general exclusion diet to try to work out their trigger foods, but it can be tough to see a pattern without expert guidance. Keeping a food diary and correlating it with your symptoms is a good idea, but remember that foods may take hours or even days to cause symptoms and be wary of cutting out so many foods that you leave yourself malnourished.

If you’re trying the exclusion approach it makes sense to start with the foods and drinks that upset a lot of IBS sufferers: coffee and anything caffeinated, alcohol, foods that cause gas like beans and legumes, carbonated drinks, very fatty and fried foods and anything with sweeteners like sorbitol.

Smartphone apps can be a big support when you’re tracking your symptoms. The Cara app tracks diet, stress and any drugs you are taking and tracks them against your symptoms before analyzing patterns and helping you identify triggers. You can send all data from the app to an email so you can share it easily with a dietician or doctor.

The Low Fodmap Diet App has been developed by Monash University in Australia and offers a comprehensive database of low fodmap foods, recipe ideas for meals and snacks and a list of certified low fodmap foods from big brands around the world.

SIBO Treatment

If your IBS is linked to SIBO – small intestinal bacterial overgrowth – then your treatment will be designed to kill the excess bacteria. This is usually done with an antibiotic to start with, so a short course of Xifaxan may be suggested.

Advice on diet will also be given, with the goal of any diet being to provide as little food as possible to the bad bacteria in your gut. Drugs called prokinetics can be helpful as they move things along your gut faster than usual and stop the bad bugs hanging around in unwanted places.

Taking a probiotic can also help – indeed, all IBS sufferers may benefit from this, not just those with SIBO. Products containing *Lactobacillus* have shown a benefit in suppressing SIBO; try VSL#3 for starters as it contains multiple strains of good bacteria.

Lifestyle Changes for IBS

Talking about stress in relation to IBS can be a tricky subject because in the past many doctors treated IBS as a psychosomatic disorder that was found in anxious, nervous patients who needed to calm down and get a grip. This patronizing attitude led to the “It’s all in your head” mantra that you still sometimes hear to this day.

Nowadays most doctors know better, of course, but it’s still important that every last IBS patient knows that they are not causing their own problems by being feeble. If your doctor recommends reducing stress it is not because the stress has *caused* your IBS, it’s that stress reduction can be one piece of the puzzle that helps you get control of your body and soothe your bowel.

Choose something that works for you, whether that’s yoga, mindfulness, a long walk in the woods or a more structured form of therapy such as cognitive behavioral therapy. Avoid smoking and alcohol as they can over-stimulate the bowel. Use a hot water bottle or a modern electric heat pad to ease the pain.

Sensitive bowels can over-react to small changes so a regular schedule of sleeping and mealtimes can make a real difference. Diarrhea sufferers sometimes find smaller, more frequent meals ease their symptoms because they don’t set off the gastrocolic reflex that tells us we need the bathroom.

Finally, if you’ve tried a range of different treatments and you’re still suffering badly, make sure you see a specialist gastroenterologist – and if you *still* don’t get any help, see another one!

It can be tough to ask for a second opinion, but doctors are only human, they have their own blind spots and biases like we all do and don’t always make the right call. And if they’re offended by you seeking out another view to try to ease your suffering, they probably weren’t a great doctor in the first place.