

It's time to get over the embarrassment and tell your M.D. what's really wrong—even if that includes the words Irritable Bowel Syndrome

By Lora M. Wintz It's embarrassing to talk about your bathroom habits. Somehow saying words like "diarrhea, "constipation" and "bowel" cause us more pain than the actual symptoms we might be experiencing. If you're the one in the one out of every five Americans who suffer from Irritable Bowel Syndrome, though, it's time to stop blushing and start talking. We know it may not be easy, but Complete Woman is here to help by arming you with the basic information you need...

The Condition

Irritable Bowel Syndrome, or IBS as it's commonly known, is one of the most common gastrointestinal disorders. It causes bloating, abdominal pain and/or discomfort and will result in a change in your bowel habits-you may

experience bouts of constipation or diarrhea, or you may alternate between the two. Typically, IBS is something you get all at once, with no warning signs or stages that lead up to the condition.

In the past, many patients have been led to believe IBS was "all in their heads" (see box at right about celebrity Cybill Shepherd, who experienced this exact thing). However, recent research shows that IBS is caused by a gastrointestinal (GI) tract that is more sensitive and works more slowly than it should. This may be due to the way the GI tract reacts to changes in serotonin, a naturally occurring chemical in the body. (Serotonin plays a key role in making our GI tracts work normally.) It's been shown that there is a difference in the way the serotonin signaling system works in the GI tract of patients with IBS compared to those without the condition.

As a real medical condition, Irritable Bowel Syndrome can be diagnosed and treated by your physician. However, there are still a lot of people who experience the symptoms of IBS who go undiagnosed because they're not talking to their doctor-in fact, 96

percent of undiagnosed patients are unaware their symptoms may actually be IBS, and 90 percent of

Irritable Bowel Syndrome

of symptoms. If you have

all of the following check

habits-either constipa-

tion or diarrhea or alter-

nating between the two

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three of the last 12

with your doctor.

☐ change in bowel

□ bloating

ply believe they'll have to live with abdominal pain and constipation or diarrhea for the rest of their lives. One important thing to note right off the bat: "Irritable Bowel Syndrome is not a life-threatening condition," states Dr. John F. Johanson, a gastroenterologist in private practice at Rockford Gastroenterology Associates Ltd. in Rockford, II., and editor for Evidence-

those people sim-

Based Gastroenterology.

The Diagnosis The symptoms of abdominal pain or discomfort, bloating and a change of bowel habits are the keys that will result in a diagnosis of Irritable Bowel Syndrome by your doctor. "The abdominal discomfort or pain is an important

component," explains Dr. Johanson. "Without that, you don't have Irritable Bowel Syndrome."

Another important factor in determining if you have IBS is the length of time you have the series of symptoms. "The typical definition is can be identified by a series if you've had symptoms for three out of the previous 12 months," says Dr. Johanson. "The symptoms don't have to abdominal discomfort or be constant for those three months, but if you've been experiencing them on and off for that period of time, you may have IBS.

In the doctor's office, once you've described these symptoms to your doctor, he will most likely follow up with a

few more questions to ensure your condition isn't anything else before officially diagnosing you with Irritable Bowel Syndrome. "The concern in some cases is the symptoms might be masking another disease," explains Dr. Johanson. "That's when we look for what we call red-flag symptoms." Red flags include rectal

bleeding, weight loss, nausea, vomiting and if the diarrhea you have causes you to wake up in the middle of the night. "Those are typically not symptoms associated with Irritable Bowel Syndrome," describes Dr. Johanson. "If any of those things are present, a doctor will look further to make sure we don't miss anything." Your physician may also order a blood test, or ask you to have a medical procedure called a colonoscopy to confirm the diagnosis.

Once you've been diagnosed with Irritable Bowel Syndrome, that's probably what it really is. "IBS doesn't lead to anything else," confirms Dr. Johanson. "The data is very good and it says that once the diagnosis points to IBS, that's really what you have."

The Patient

While Irritable Bowel Syndrome can affect anyone, women are more likely to be diagnosed with the condition. "It does affect women probably two to three times more than men," confirms Dr. Johanson. In fact, the numbers show 70 percent of those who report IBS symptoms are women.

An IBS patient is also likely to be a bit younger when they first begin experiencing symptoms. "It tends to occur in younger age groups," relays Dr. Johanson. "Oftentimes it will start in the early 20s." It can also appear in

women in their 30s and 40s and, although less common, it can also affect someone for the first time in their 50s and 60s.

The basic symptoms for IBS do not necessarily change from person to person (abdominal pain/discomfort and change of bowel habits are the same), however the severity of the condition can vary. "It's kind of an individual condition," explains Dr. Johanson. "Some people experience the symptoms daily, some people have them once a week." There can also be a difference in the "triggers" for the symptoms, specific elements that may bring on a bout of IBS. "There are certain triggers for some people that don't bother other people. Stress or certain foods can bother some and not others, as do certain activities." describes Dr. Johanson.

The Treatment

"Treating Irritable Bowe Syndrome depends on the individual person," says Dr Johanson. "Doctors base the treatment on the symptoms." Usually, physicians will start with lifestyle changes. "Stress reduction, exercise, drinking more fluids, eating more fiber, eating a healthier diet, those are all things I recommend as the first step,' shares Dr. Johanson. "Besides being relatively cheap and safe, they're something the patient

can participate in; it allows them to take control of their life and take control of their condition."

The doctor may also recommend a variety of other solutions. For example, "If the patient has predominantly pain and diarrhea

as their IBS symp toms, the doctor might start with a bulking agent to try to reduce some of the diarrhea, or prescribe an over-thecounter or prescription anti-diarrhea or anti-spasm medication," explains Dr. Johanson. "For those with constipation, fiber may help, or prescriptionbased or over-thecounter laxatives like milk of magnesia."

For Irritable **Bowel Syndrome** With Constipation, there have been new strides made in the prescription medication arena.

One you may have seen commercials for on television is Zelnorm. "Zelnorm has actually been shown to treat all the symptoms, including constipation, bloating and abdominal pain and discomfort," relays Dr Johansson. This is important news for IBS With Constipation patients, as some of the other

remedies, like fiber, will help control the constipation, but may actually make other symptoms, like bloating or pain, worse.

Whether the treatment is with prescription or over-the-counter medications, the good news is an IBS patient will not

Syndrome you have questions

about or other health-related

concerns, your doctor should

you need. If it's 2 a.m., though,

and you're looking for informa-

tion now, you can turn to the

Resource Center (NWHRC).

The leading nonprofit inde-

to providing health information

and resources to women of all

ages, NWHRC was founded by

women for women. Check out

www.healthywomen.org or call

their toll-free hotline at 1-877-

National Women's Health

always necessarily have to be on the medication. Once diagnosed with Irritable Bowel Syndrome, you will have the condition forever, however, be able to give you the answers the symptoms may not always be present. "There's no rhyme or reason why people's symptoms go away or come, but pendent organization dedicated doctors will recommend the medication only for those times when the symptoms are bothersome. Oftentimes, they'll try to have patients off the medication

after a period of three to six months," explains Dr. Johanson. This isn't the case for everybody, "Some people may have to take the medication every day for the rest of their lives," says Dr. Johanson. "But, in general, symptoms tend to wax and wane and patients can be off the medication for periods of time."

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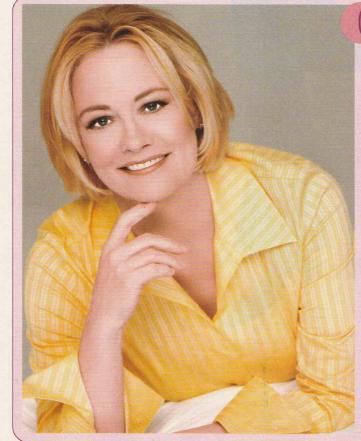
Irritable Bowel Syndrome can affect anyone-including a major Hollywood celebrity. Actress and singer Cybill Shepherd, best known for her film roles in The Last Picture Show, Taxi Driver and Chances Are, television series Moonlighting and Cybill and made-for-television movie Martha Inc: The Story Of Martha Stewart, as well as the creator of her own one-woman show, Cybill Disobedience...With Music and her latest CD, At Home With Cybill, was diagnosed with Irritable Bowel Syndrome With Constipation. She now works with the National Women's Health Resource Center and Novartis Pharmaceutical Corporation (makers of prescription Zelnorm) on the Amazing Women campaign (visit www.zwomen.org), designed to empower women to seek proper diagnosis and treatment for IBS. Complete Woman sat down with Cybill to hear her personal story...

"I suffered for more than 20 years with constipation, abdominal pain and bloating. I went to my doctor and told him my symptoms, and he said they were all in my head—it was either psychological or emotional. I would try to make it through my work but would just have to try to lie down all the time. I tried everything to feel better. I tried eating more fiber, fiber supplements, over-the-counter laxatives, eating all white food, and none of it worked. I

didn't enjoy my free time. "I finally changed doctors and she

diagnosed me with Irritable Bowel Syndrome With Constipation. I tried the medication Zelnorm and it worked: it helped with all three of my symptoms. Now I'm an advocate for women's health for the third time in my career. The first was for women's reproductive freedom and I marched on Washington; the second was for menopause and we did two primetime episodes of Cybill dedicated to it. When I became aware of Irritable Bowel Syndrome and realized that six million women are suffering, I became involved in Amazing Women. How much more amazing could women be if we could have something to help us with these symptoms?

"I usually start my interviews about IBS just by saying the word 'constipation' and everybody laughs because we're all so embarrassed about it. But why should we suffer in silence? Our silence has never protected us in any way. If we could come out of the closet and not be afraid... I feel like whenever I get a chance where I feel I can perhaps talk about IBS or another health concern in a way that no one else can talk about it. I should. I would feel bad if I didn't. IBS is a real illness and it's a treatable medical condition



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