Incidence of IBS

Irritable Bowel Syndrome (IBS) is a devastating condition that affects up to 20% of the world’s population. It is sometimes referred to as Spastic Colon, Idiopathic Constipation, or Nervous Diarrhoea.

IBS is the most common chronic health disorder in America, Canada, the UK, Australia, and New Zealand, affecting more people than asthma, diabetes, and depression combined.

Diagnosing IBS

The Rome II diagnostic criteria are the current defining standard for IBS. There must have been at least 12 weeks in the last 12 months with abdominal discomfort or pain that has two out of three of these features:

1. Relieved with defecation
2. Onset associated with a change in frequency of stool; and/or
3. Onset associated with a change in form (appearance) of stool.

Some Symptoms associated with IBS

1. Abnormal stool frequency, defined as greater than 3 bowel movements per day and less than 3 bowel movements per week
2. Abnormal stool form (pellets or lumpy/hard or loose/watery stool)
3. Abnormal stool passage (straining, urgency or feeling of incomplete evacuation)
4. Passage of mucus in stools.
5. Bloating or feeling of abdominal distension.
6. Excessive fatigue or tiredness.
7. Foggy head or poor concentration.
8. Irritability, anxiety or depression may be present.

What is Irritable Bowel Syndrome (IBS)?

IBS and Incidence of Psychiatric Disorders

70 to 90% of people with IBS have a mood disorder, anxiety or depression. Most also suffer from excessive fatigue or tiredness.

Factors Contributing to IBS and Treatment Options

IBS may be the result of a combination of factors

1. Abnormal Essential fatty acid metabolism (Low Omega 3) can result in impaired integrity of the cells that line the Gut, leading to a Leaky Gut and coincidentally less than optimum brain cell structures.
2. An imbalance in the normal bacteria population in the Gut characterised by an undergrowth of some beneficial bacteria that produce substances, such as amino acids, that are essential for good health.
3. At the same time there may be an overgrowth of opportunistic bacteria that may produce compounds that are detrimental to health.
4. Prescribed antibiotics and analgesics as well as food preservatives and fluoride can suppress the growth of some beneficial bacteria in the Gut, leaving opportunistic organisms to overgrow and produce excessive amounts of compounds, such as trace amines and neurotoxins.
5. The discovery of trace amines receptors in the same areas as neurotransmitter receptors, suggests a major role for depression and subjective feelings of fatigue.
6. There is evidence from gut wall biopsies that the activity of some gut bacteria, embedded in an impaired Gut wall, drives Irritable Bowel Syndrome and Inflammatory Bowel disease. The deeper the penetration of bacteria the more serious the symptoms observed.
7. Impaired permeability means that large molecules of partially de-natured foods can penetrate the gut wall and trigger autoimmune inflammatory reactions. The resulting IgG autoimmune antibodies can be measured in a blood test, called an IgG Eliza assay.

Treatment at the Clinic

1. A specialist faecal test from Bioscreen Medical at Melbourne University is used to help identify and treat the bacteria imbalance.
2. Removal of IgG sensitive foods is used to improve symptoms.
3. Specific diet and nutrients supplements are prescribed to heal the gut wall and improve brain function.
4. Targeted CBT counseling techniques are used to educate and reduce anxiety and depression.