

A psychological approach to the management of irritable bowel syndrome

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Antidepressants and psychological treatments such as hypnotherapy have the potential to help patients with severe irritable bowel syndrome (IBS), say researchers in this week's BMJ.

IBS is a very common disorder, but conventional 'physical' treatments often do not work very well and patients can feel that their symptoms are being ignored, downplayed or misunderstood.

Patients with IBS are more likely to suffer from depression and have 'abnormal' behaviour patterns including anxiety and somatisation (conversion of an emotional, mental, or psychosocial problem to a physical complaint). This has led to the idea that IBS has a psychological as well as a biological basis and a growing body of evidence supports the use of antidepressants for IBS, write the authors.

However, many doctors are reluctant to prescribe such agents to patients who are clearly not depressed.

Other "psychological" therapies exist that patients with IBS should be made aware of, they say. For example, 'talking therapy' (known as cognitive behavioural therapy) is as effective as antidepressant treatment and its benefits last longer.

Hypnotherapy has also been reported to be an effective intervention for IBS in small trials, although a recent review of hypnotherapy trials found insufficient evidence to recommend its widespread use and suggested

that this treatment option should be restricted to specialist centres dealing with more severe cases of the syndrome.

Nevertheless, hypnotherapy has the potential to help those patients whose IBS is severe, say the authors.

The choice of treatment will depend on the individual patient and, inevitably, will be limited by local availability, they add. However, IBS is undeniably very common and many patients are probably denied help by lack of access to therapists with the appropriate psychological skills.

They believe that increasing provision of primary care services for patients with IBS will provide an avenue for effective and early psychological treatment for a condition in which real improvement can be achieved.

Source: BMJ-British Medical Journal

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