

ACG: New guidelines issued for irritable bowel syndrome

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(HealthDay)—New guidelines have been issued in relation to the management of irritable bowel syndrome (IBS) and chronic idiopathic constipation. The updated guidelines were published as a supplement to the August issue of the *American Journal of Gastroenterology*.

Alexander C. Ford, M.B., Ch.B., M.D., from St. James's University Hospital in Leeds, U.K., and colleagues from the American College of Gastroenterology Task Force on the Management of Functional Bowel Disorders conducted a systematic review of the literature to update guidelines on the [management](#) of IBS and chronic idiopathic constipation.

The researchers note that there is weak evidence for specialized diets improving symptoms of IBS, and for fiber and psyllium providing symptom relief in IBS. Weak evidence was also found for the beneficial

effects of probiotics, rifaximin, antispasmodics, peppermint oil, antidepressants, a variety of psychological interventions, and aldosterone for females. Strong evidence was found for linaclotide and lubiprostone versus placebo in IBS with constipation. For chronic idiopathic constipation, strong evidence was found for fiber supplements, polyethylene glycol, lactulose, sodium picosulfate, and bisacodyl, as well as prucalopride, linaclotide, and lubiprostone.

"This new meta-analysis of the literature on the management of IBS and chronic idiopathic constipation offers physicians scientifically-based guidance to make clinical decisions about these conditions based on a thorough assessment of the [evidence](#)," a coauthor said in a statement.

"However, it is important that patients talk with their doctors about their treatment options, as there is no one-size-fits-all approach to managing IBS or [chronic constipation](#)."

Several authors disclosed financial ties to the pharmaceutical and medical device industries. The research was funded by companies from the pharmaceutical and nutrition industries.

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