

Upper functional GI disorders often overlap with IBS

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(HealthDay)—Factors associated with the overlap of upper functional

gastrointestinal disorders (FGIDs) with irritable bowel syndrome (IBS) have been identified, according to a study published in the September issue of the *Journal of Gastroenterology and Hepatology*.

Xin Yao, from the Bethune International Peace Hospital in Shijiazhuang, China, and colleagues enrolled patients from the outpatient gastroenterology clinics of three tertiary hospitals in China. They recorded all upper gastrointestinal (GI) symptoms occurring at least once a week in the last three months. Data were included for 751 patients who met Rome III criteria for IBS; 735 IBS patients participated in an interview.

The researchers found that the most prevalent upper GI symptoms were postprandial fullness, belching, and regurgitation (30.6, 27.1, and 21.8 percent, respectively) in IBS patients. The most frequent upper FGIDs were functional dyspepsia (FD), belching disorders, and functional heartburn (36.7, 27.1, and 16.3 percent). Factors associated with the IBS-FD overlap included female sex, divorced or widowed versus married status, defecation straining, reduced bowel movement, mixed IBS, abdominal distention, mild abdominal pain, and moderate discomfort. Independent risk factors for IBS-belching disorder overlap included female sex, drinking, moderate discomfort, and mild-to-moderate distention.

"The study provides detailed overlap spectra of upper FGID with IBS," the authors write. "Mixed IBS is an important risk factor for IBS-FD overlap, which deserved more concern."

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