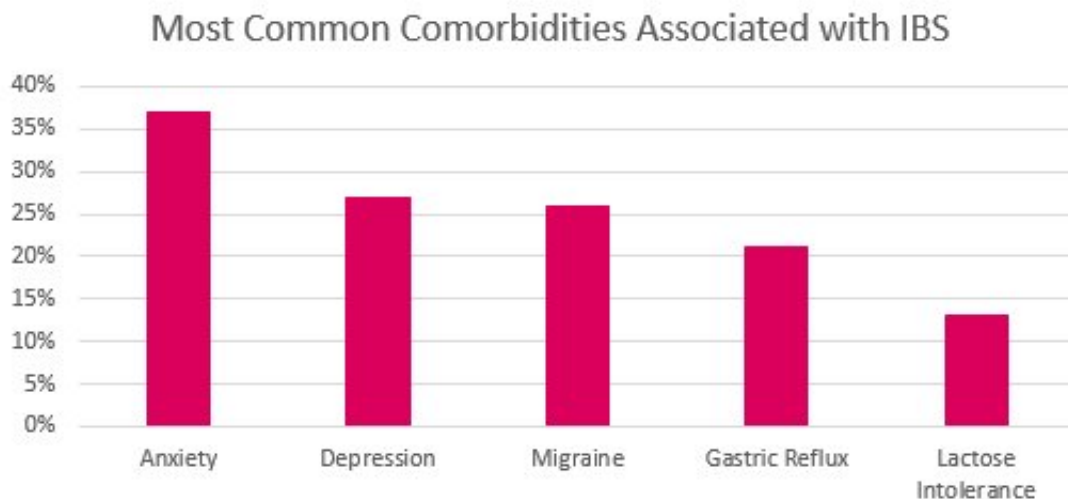


One in 10 IBS with diarrhoea patients wish they were dead when their condition is bad

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Anxiety, depression, migraine, gastric reflux, and lactose intolerance are the most common commodities associated with IBS. Credit: Luke Paskins

Eleven percent of irritable bowel syndrome with diarrhoea (IBS-D) patients reveal that they suffer from suicidal thinking when their condition is bad, a new study has found.

The research, published in the *UEG Journal*, assessed the burden associated with [irritable bowel syndrome](#) with diarrhoea by surveying 513 patients and 679 [healthcare professionals](#). A quarter of patients reported that IBS stops them from enjoying life and 11% agreed with the statement; 'when my IBS is bad, I wish I was dead'.

IBS is a functional bowel disorder, characterised by abdominal pain and altered bowel habits. The disease affects 11% of adults globally, of whom one third experience diarrhoea as the predominant symptom. IBS-D is considered to be a brain-gut interaction disorder and a range of treatment approaches have been proposed, including diet and lifestyle modifications, probiotics and fibre supplements and various prescription and over-the-counter medications.

Over a third of patients reported that they 'constantly' worry about whether and when their IBS symptoms will return and one in five stated that IBS had negatively affected their working life. Patients also revealed that, on average, they spend 18 days per month experiencing fatigue or a lack of energy. Half of patients reported that they would use a daily treatment for the rest of their life if it prevented their IBS symptoms (49%) and a 'willingness to try anything' to improve their condition (46%).

Despite these alarming statistics, the survey outlined that one third of IBS patients do not think that [healthcare](#) professionals take the disease seriously and should provide more support in disease management. When reviewing the attitudes of healthcare professionals towards IBS, results showed that two-thirds agreed that patients should feel listened to and supported, with the vast majority stating that the main aim of their care when managing IBS is significantly improving their patients' quality of life.

Professor Hans Törnblom, lead author of the study, comments on the findings, "IBS can be an extremely tough, emotional and difficult condition to live with and, in addition to dedicating resources to improve the physical burden of IBS, it is essential that care and investment is committed to providing psychological and emotional support for patients. This should come from multi-disciplined healthcare professionals, as well as family members, friends and colleagues."

"The majority of IBS sufferers do not seek medical advice for their condition" added Professor Törnblom. "Of those that do speak to a healthcare professional, it is clear that there are high levels of dissatisfaction with the level of care that they currently receive. Healthcare professionals experience a degree of uncertainty and complexity in managing IBS patients and the research indicates the need for higher levels of communication between care providers and [patients](#) to facilitate improved patient outcomes."

More information: Hans Törnblom et al, Understanding symptom burden and attitudes to irritable bowel syndrome with diarrhoea: Results from patient and healthcare professional surveys, *United European Gastroenterology Journal* (2018). DOI: [10.1177/2050640618787648](https://doi.org/10.1177/2050640618787648)

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