

Irritable Bowel Syndrome and Female Patients



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KEYWORDS

- Irritable bowel syndrome • Female gender • Diet • Treatment • Constipation • Diarrhea

KEY POINTS

- Irritable bowel syndrome (IBS) is a predominantly female disorder characterized by abdominal pain or discomfort associated with altered bowel habit (diarrhea, constipation, or both) symptoms.
- Pathophysiology of IBS is heterogeneous and includes altered motility, visceral hypersensitivity, changes in gut permeability, immune activation, brain-gut dysregulation, autonomic nervous system dysfunction, and changes in gut microbiome, all of which may be mediated by gender-related differences.
- A confident IBS diagnosis can be made based on symptom criteria, exclusion of alarm features, recognition of female predominant overlap syndromes, and thoughtful use of bowel habit-based diagnostic work-up.
- Successful management of the female patients with IBS involves understanding female gender roles as well as establishment of active listening and a caring positive clinician-patient relationship.
- Treatment approach requires an assessment of lifestyle (diet, sleep, and exercise), gut-directed pharmacotherapy, and psychological therapies as indicated by IBS disease severity.

INTRODUCTION

Irritable bowel syndrome (IBS) is a common gastrointestinal (GI) disorder characterized by abdominal pain and discomfort that is associated with altered bowel function and that can involve diarrhea, constipation, or mixed bowel patterns. It is a chronic

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disorder with a female predominance ranging from 2:1 to 4:1 depending on the clinical setting.¹ Worldwide the prevalence varies from 7% to 21%.² Female prevalence may also vary according to geographic location. In Asia the distribution seems to be fairly equal between men and women but in the United States, Israel, and Canada the disorder is twice as prevalent in women.³ In veterans returning from the Gulf War, IBS is more prevalent in women than in men (3.7% vs 1.6%) and more often linked to depression, whereas men have a greater likelihood of having posttraumatic stress disorder (PTSD).⁴ Female patients have more constipation and abdominal pain and male patients complain more of diarrhea.^{5,6}

Although several pathophysiologic mechanisms have been put forth, including increased visceral sensation, alterations in intestinal motility and permeability, autonomic nervous system dysregulation, activation of GI immune function, brain-gut dysregulation, and alterations in the gut microbiome, sex hormones and psychosocial factors may also play a pathophysiologic role.^{7,8} It is also notable that many of the comorbid conditions associated with IBS also have a female predominance; for example, fibromyalgia, chronic pelvic pain, migraine headache, and chronic fatigue syndrome, as well as other functional GI disorders such as functional dyspepsia.⁸ This article focuses on how female gender influences the pathophysiology, diagnosis, management, and treatment of this common disorder and discusses the evidence and important controversies related to these areas.

PATHOPHYSIOLOGY

Table 1 summarizes the proposed mechanisms of IBS and emphasizes the heterogeneity of the disorder. Diet, gut (motility, visceral hypersensitivity), psychological

| Table 1 Pathophysiology of IBS: site of defect and proposed mechanisms | |
|---|---|
| Site of Defect | Proposed Problem/Defect |
| GI tract | Diet (food intolerance or sensitivity) Changes in microbiome (possibly antibiotics, dysbiosis) Immune mediated secondary to infection Altered motility Increased intestinal permeability Increased mast cells Effects of sex hormones |
| Genetic ^a | Abnormality in serotonin receptors Abnormality in sodium ion channel Defect in protein in immune response Altered bile acid metabolism |
| Psychological | Depression Anxiety Stress Coping Abuse: sexual, physical, verbal, early adverse life events Somatization Posttraumatic stress disorder |
| CNS | CNS processing of afferent gut signals Visceral hypersensitivity Sex hormones |

Abbreviation: CNS, central nervous system.

^a May only be present in a few individuals.

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