# 9 Symptoms of IBS to Be Aware Of

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## Understanding IBS Symptoms

The symptoms of irritable bowel syndrome (IBS) can vary quite widely from person to person. You might have to cope with mild diarrhea and bloating, whereas I might have severe constipation and stomach cramps.

One person might be able to control their IBS symptoms fairly easily with diet or medication, whereas another might find their whole life is affected by their illness and they struggle even to hold down a job.

There are no hard and fast categories for the severity of IBS, but doctors may use the terms mild, moderate or severe to assess how badly you are affected. A defining feature of IBS is that these symptoms will usually vary over time, so a patient may have weeks or months where they are suffering badly but then have periods of time when they feel much better.

Here are nine symptoms that you may experience if you have irritable bowel syndrome.

**Pain**

Let's start by looking at pain because many people do not realize that pain is a significant feature of IBS. In reality, a massive three-quarters of sufferers say they have to cope with IBS-related pain that they either feel all the time or very often.

For many people the pain can be the most difficult symptom to bear, particularly as IBS is a chronic condition that can affect you for months or years, gradually wearing you down over time.

Stomach cramps and pains are such a big part of IBS that you cannot be diagnosed with IBS if you have no pain at all (according to the Rome Criteria, the list of symptoms that doctors use to diagnose IBS). These pains may feel like a mildly uncomfortable feeling around your belly, a sharper, stabbing sensation or a full, heavy stomachache. The pain will often reduce after a bowel movement but increase after a meal, due to the amount of pressure within the gut.

Most healthy people will experience a certain level of pain when they have constipation or diarrhea, but in IBS this problem is exacerbated because the brain is even more sensitive to pain signals from the intestinal nerves than normal. This is known as "hypersensitivity" and means that where a healthy person might feel little or no pain in a certain situation – a few days of constipation, for example – an IBS person would feel much more pain.

The "brain-gut axis" malfunctioning causes this sensitivity – the communication between brain and gut has gone very wrong. So, when the body tells the brain of an IBS sufferer who is in pain, the brain interprets the pain as being far more severe than it actually is. In experiments that used brain imaging, it has been proven that IBS brains actually react differently to pain than the brains of healthy people.

The pain of IBS can be difficult to deal with because it often does not respond to basic painkillers like Tylenol or ibuprofen and the stronger painkillers like codeine can cause gut problems themselves.

Usually, the best way to tackle the pain is to attack the diarrhea or constipation that is causing it. Once the normal rhythm of the bowel is regained, the pain should disappear.

**Diarrhea**

Diarrhea experienced by IBS sufferers is usually characterized by two things – the number of bowel movements (BMs) passed each day and how quickly you need to get to the bathroom. It's usually defined as more than three BMs per day. In women, diarrhea can be particularly bad just before or just after their get their period.

Patients with mild or moderate IBS-D might have three or four bowel movements in a day, whereas those with severe symptoms can have many more, to the point where it can be difficult to leave the house and live a normal life.

Diarrhea is often at its worst in the morning and can be particularly bad just after the first meal or hot drink of the day. This is because of the gastrocolic reflex, a fancy term which just means that the bowel is most active after a meal. Stools will often be loose and watery, although not always.

Urgency can be a very distressing part of this illness. In a healthy person, the body sends a message that a bathroom is needed but this urge can be ignored if necessary, and the BM delayed.

For an IBS sufferer, the message can often be: "Get to a toilet now!" If there is no toilet nearby, then incontinence can be the result, a horrible part of this illness that only occurs, thankfully, in a small number of patients with the most severe version of the disorder.

**Constipation**

If you do not visit the restroom three or more times per week, you might be constipated. This symptom often brings hard, small stools that are difficult to pass; this is because the waste matter has been inside the body too long and the colon has absorbed too much water. Bowel movements may look like pellets or be larger than usual.

When constipation continues for several days or more, it can become more and more painful as the pressure within the body builds. If you are having to strain on the toilet, this can sometimes lead to hemorrhoids, swollen veins that are a bit like varicose veins in the anus or rectum. Hemorrhoids are not a specific symptom of IBS, but they are fairly common in IBS sufferers because of all the gut troubles we suffer from. (Some diarrhea sufferers get them too.)

Although patients with constipation-predominant IBS generally avoid the urgency and incontinence problems of IBS-D and do not need to stay close to a restroom, this "advantage" is often offset by the fact that they may rarely feel completely comfortable and often find that the pain increases as more and more days go by without a BM.

It's worth mentioning that one person's idea of constipation may be different to another's. Obviously not going to the bathroom for many days means you are constipated, but some people refer to constipation when they mean a stool was hard to pass, others when they mean that they're not getting any urge to go to the bathroom at all. Generally, though doctors use the "three times or less" per week rule as their definition.

**Both Diarrhea and Constipation**

Some people get the worst of both worlds and get bouts of diarrhea as well as bouts of constipation. This type of IBS is known as alternating or mixed IBS. What happens in practice is that you might be constipated for many days and then, rather than gradually getting back to normal, you start suffering from diarrhea for a day or two instead.

Some people find that their bowels are so unpredictable they can struggle to pass a stool and then struggle to leave the bathroom because of diarrhea on the very same day. This type of IBS can be particularly tough to cope with because the usual medications for tackling IBS may make things worse.

Anti-diarrheals like Imodium may just cause more constipation and laxatives like Exlax will lead to more diarrhea. It can be challenging to find a balance of medications that keep you in that healthy middle ground.

**Incomplete Evacuation**

If you have ever had that annoying, unsatisfying feeling of having a bowel movement but feeling like it has not all come out, that is known as “incomplete evacuation.” Your doctor might refer to it as “tenesmus,” which just means feeling like you always need to go to the bathroom.

This sensation can be felt both when you genuinely need to go but cannot, perhaps due to constipation or hard stools, but also when there is no actual waste product in the rectum. If the latter is the case, you will feel like you always need to pass a movement, but as there is nothing to pass, it will not happen – a very annoying symptom that can also be painful as well.

**Passing Mucus**

It’s completely normal for our guts to produce mucus, a clear or white gungy stuff that helps to protect and moisten the lining of the intestines. It’s also normal for a small amount of this mucus to be in our stools, but it is not usually visible to the naked eye. In IBS, enough mucus can be passed to be noticeable.

Although a sign of IBS, this symptom does not cause any pain by itself and it does not mean any damage is being caused to the intestines, just that they are not working as smoothly as they should be.

Unless the mucus is mixed with blood, it is not a symptom to be worried about, just another rather unpleasant aspect of IBS. (Bleeding from the back passage is *not* a symptom of IBS and should always be checked out by a doctor.)

**Bloating**

Most people will have experienced that overfull, heavy feeling of bloating when they have overeaten, but the bloating of IBS can feel on a whole other level. As well as that tight, heavy feeling the stomach can actually swell so that in severe cases female sufferers complain of looking pregnant.

Bloating often gets worse as the day goes on, so you may wake up feeling okay but find that by the end of the day your stomach feels distended and uncomfortable. You may even have trouble fitting into your normal size of clothes if the bloating is particularly bad. Although bloating is not usually the most distressing part of IBS it can have a negative effect on self-esteem and make it even tougher to keep a social life going.

Confusingly, studies that have looked at why bloating occurs have not found that IBS patients have more gas than healthy people, so it is unclear why this symptom occurs.

Some everyday foods and drinks can cause bloating, and IBS patients may be more sensitive to their effects – fizzy sodas, chewing gum, sugar-free products and beans can all cause bloating.

Some fiber supplements that are used to fight constipation or diarrhea can also exacerbate the problem as they ferment inside us and give off the gas.

**Nausea**

Nausea is not considered to be a core symptom of IBS, so you can certainly be diagnosed with IBS without ever

having it, but quite a lot of people find that feeling sick is sometimes part of the deal.

This might be because of constipation and feeling over-full, a part of bloating, or a side effect from a medication you are taking. Although nausea is relatively common in IBS sufferers, vomiting itself is not a typical symptom and would need investigating further.

**Gas and Flatulence**

The last item on this list is gas, which can cause problems both due to the flatulence it creates but also because it can be quite painful.

As mentioned above, studies have not shown that IBS patients have more gas than others. However, there have been a number of rather bizarre experiments where a balloon is inserted into the back passage and inflated to test how much pain the patient feels. The results were that people with IBS found the inflated balloon more painful to cope with than the healthy volunteers. This suggests that even a perfectly normal amount of gas in the digestive system could be experienced as painful by an IBS sufferer, as they could feel the gas naturally distending the colon and moving along the gut.

It's worth pointing out that researchers have also subjected IBS patients to other painful things like electric shocks and ice water, but in those studies the pain threshold of IBS sufferers was the same or even higher than healthy people, disproving a theory that the extra pain was caused by all of us with IBS having "neurotic" personality traits. The pain of IBS is very real and we do *not* just have low pain thresholds.

**Living with IBS**

Looking at all these IBS symptoms in black and white can make for pretty depressing reading. Nobody would choose to live with even one of these painful, embarrassing problems so a whole collection of them can seem daunting in the extreme.

But please do not despair if you are a fellow IBS sufferer. This is a comprehensive list of symptoms, but it is very unlikely that you will experience them all. The nature of IBS means that you may have some tough times, but it is also likely like that you will get periods of remission as well when you can recover and regroup.

While there is not a set treatment plan for this illness, there are a number of ways the IBS symptoms can be controlled and contained. With a little time and trial and error, you can find the medications that help you, whether that is over-the-counter remedies like Imodium or milk of magnesia or the drugs developed specifically for IBS such as Linzess for constipation-predominant IBS.

**Change in Diet**

Many people who experience IBS symptoms find relief through a change in diet, and a registered dietitian can help you discover what regime works best for you. This could involve excluding certain groups of foods (dairy or wheat-based foods, for example) or following a special diet like the FODMAPs diet which was developed by Australian researchers specifically to help IBS patients.

**Use Fiber Supplements**

Fiber supplements like Citrucel and Metamucil are used widely by both diarrhea and constipation sufferers to calm over-active bowels or make stools easier to pass.

Many people learn to use natural supplements like magnesium or calcium to either slow or speed up their digestion or use good quality probiotics to tackle stomach pain and bloating.

**Deal With Stress**

If stress is a key trigger for your symptoms, then gut-directed hypnotherapy can be a good option as it is so calming and relaxing.

Cognitive behavioral therapy can tackle any bad habits or harmful coping strategies you maybe be using, and the more ordinary style of psychotherapy will help anyone whose IBS has been made worse by traumatic life experiences.

Alternative therapies such as acupuncture may come in handy, and yoga can help to give stomach muscles a good workout and get things moving.

Being honest about your problems can also go a long way towards making your life easier. Many people go to great lengths to hide their bowel problems because the thought of talking about them is so mortifying, but this approach leaves you suffering alone and trying to pretend that IBS is no big deal.

Once you start opening up about your struggles you will often find someone who has similar issues or is at least sympathetic to those who do. There are plenty of online communities available where you can be brutally honest about what you are going through, and no-one will bat an eyelid.

You absolutely deserve support as you fight against this illness, but if you never tell your boss or your family what you are going through, they can never help. Remember – everybody poops!

**Don't Give Up**

There’s no doubt that IBS is taken far more seriously by medical professionals than it used to be and there are far more treatment options available in the 21$^{st}$ century than there used to be too.

Gone are the days when IBS sufferers were sent straight home by their doctors and told to learn to live with it – there really is help and support available for everyone who is struggling with IBS symptoms.