



Chronic pain is the dominant symptom experienced by people who see a doctor for irritable bowel syndrome (IBS). Three out of 4 people with IBS report continuous or frequent abdominal (belly) pain, with pain the primary factor that makes their IBS severe.

What is chronic pain?

Pain that lasts or recurs for 3–6 months or longer is termed *chronic*. The pain in IBS is referred to as chronic *visceral* pain. Visceral pain involves the internal organs – in IBS the intestines or bowels, commonly called the *gut*.

What is IBS?

IBS is a chronic condition in which abdominal pain is associated with a range of symptoms. Typically, the pain is accompanied by diarrhea, constipation, or alternating episodes of both. Other symptoms may also be present.

Where is IBS pain felt?

The chronic pain in IBS can be felt anywhere in the abdomen, though most often in the lower abdomen. It may be worsened soon after eating, and relieved, or at times worsened, after a bowel movement. It is not always predictable and may change over time. People with IBS differently describe how the pain feels; some examples include cramping, stabbing, aching, sharp, or throbbing.

Is there a test for IBS?

Standard diagnostic test results are normal in people with IBS. While diagnostic testing is useful for certain problems, a physician can generally diagnose IBS by recognizing certain defined symptom details, performing a physical examination, and undertaking limited diagnostic testing.

How can IBS be so painful when nothing irregular shows up on tests?

Symptoms of IBS in general are caused by the presence of biological factors that are happening inside the body, which are not easily visible. IBS is a condition where the symptoms relate to changes in normal gastrointestinal function. There are abnormal brain-gut interactions that affect both pain signals and movement of the bowels (motility). As a result, people with IBS may experience pain from sensations that other people are normally unaware of, or have more severe pain than others who may also feel some pain.

Why does pain arise in IBS?

Pain is processed and perceived in the brain. The signals that arise in the bowels are relayed to areas of the brain where the signals are experienced as painful sensations. Various factors, ranging from physical to emotional, can influence how the pain is perceived. The pain in IBS is closely related to an altered response by the brain to normal signals that arise from the gut, which “turn up the volume” on sensations.

This understanding of the brain-gut connection is essential, not only to the cause of the chronic pain, but also to its treatment.

The brain can “turn down the volume” to decrease pain as well as turn it up. Advances in science over the past two decades have led to improved understanding about the interactions between the brain and the gut.

Are opioids a treatment for IBS pain?

Opioids are *not* a treatment for IBS pain; there is no evidence of long-term benefit. Opioids slow down the gut causing constipation, gastroparesis, nausea, and vomiting. About 5–6% of people who go on opioids develop a condition called *narcotic bowel syndrome*, which worsens pain.

How is pain in IBS treated?

Currently, there is no sure treatment that will eliminate 100% of the chronic pain in IBS. But, there are a number of approaches that can reduce and bring the pain under control. These include self-management approaches, psychological approaches, and medications.

Finding and working with a patient-centered healthcare provider familiar with the concepts of brain-gut interactions in IBS will help ensure the best available care for the chronic pain and other symptoms of irritable bowel syndrome.

For in-depth information on this topic, see IFFGD publication #274, *Understanding and Managing Pain in IBS*, by Douglas A. Drossman, MD.

About IFFGD

The International Foundation for Gastrointestinal Disorders (IFFGD) is a 501(c)(3) nonprofit education and research organization. We work to promote awareness, scientific advancement, and improved care for people affected by chronic digestive conditions. Our mission is to inform, assist, and support people affected by gastrointestinal disorders. Founded in 1991, we rely on donors to carry out our mission. Visit our website at: www.iffgd.org or www.aboutibs.org.

IFFGD

537 Long Point Road, Suite 101
Mt Pleasant, SC 29464

About the Publication

Opinions expressed are an author’s own and not necessarily those of the International Foundation for Gastrointestinal Disorders (IFFGD). IFFGD does not guarantee or endorse any product in this publication or any claim made by an author and disclaims all liability relating thereto. This article is in no way intended to replace the knowledge or diagnosis of your healthcare provider. We advise seeing a healthcare provider whenever a health problem arises requiring an expert’s care.

For more information, or permission to reprint this article, contact IFFGD by phone at 414-964-1799 or by email at iffgd@iffgd.org.
