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The following slides were presented during the *Nancy and Bill Norton Education Series* Event at the University of Michigan Food for Life Kitchen. To view this presentation and the all videos available during this program, please visit http://bit.ly/NES2020MI.





Living your **BEST** IBS Life

Practical Tools to

Beat the Battle with your Bowels

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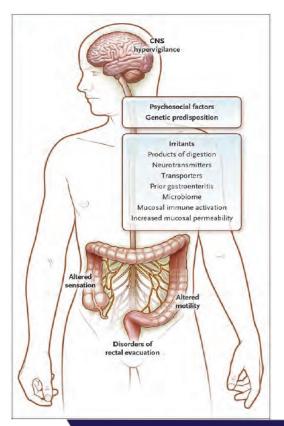
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Roadmap

- What is IBS?
- Tips for making the most of your GI visit
 - Practical tools for helping us help you
- Treatments
 - Placebo and nocebo effect
 - Natural supplements, pre/probiotics, herbals
 - Cannabis
 - Diet
 - Complementary treatments
 - Gl Behavioral Health
 - Prescription medications

What IBS is...

- IBS = Irritable Bowel Syndrome
- Abdominal pain/discomfort + Abnormal bowel movements
- Usually constipation or diarrhea (but can be both or neither!)
- Very complex physiology



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Camilleri, M. Peripheral Mechanisms in Irritable Bowel Syndrome. N Engl J Med 2012.

What IBS is NOT...

- IBD = Inflammatory Bowel Disease
- Crohn's disease, ulcerative colitis, microscopic colitis
- FATAL
- Does not affect quantity of life but does affect QUALITY
- ALL in your head!
- Though often the brain **contributes** to the problem
- Called "Brain-Gut-Microbiome Interaction"

Making the most of your GI Visit Organize your thoughts/experiences

- Notebooks can be helpful for self-reflection, discovering triggers
- Notebooks NOT helpful for limited office visits
- One page summary very helpful: "IBS Snapshot"

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Making the most of your GI Visit Tests we are looking for (if already done)

Lab work:



- CBC (complete blood count)
- BMP or CMP (chemistry panel)
- Liver function tests (hepatic panel)
- C-reactive protein
- Sedimentation rate
- Celiac testing (tissue transglutaminase, total IgA levels)

Imaging (dates performed):

- CT scans or MRI's of abdomen
- Full reports + images sent most helpful

Stool studies:



- Fecal calprotectin or lactoferrin
- · C. diff testing (clostridium difficile)
- Giardia and cryptosporidia testing
- GI PCR (panel for many different infections)



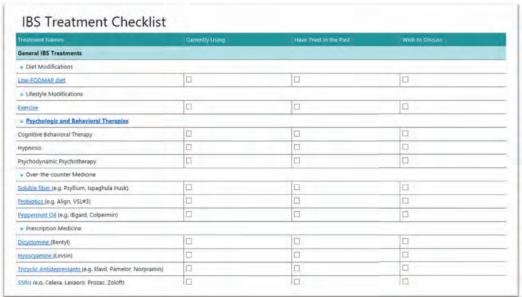
Scopes (upper endoscopy, colonoscopy):

- Full reports most helpful
- Biopsy reports also important (pathology)
- Images less important
- EGD = upper endoscopy

Making the most of your GI Visit IBS Snapshot Example

	o chaponot Example									
	My IBS	Snapshot								
	Predominant symptoms:	4) Previous treatments								
	Diarrhea, Bristol type 6-7	Treatment	Duration	Reason for stopping						
	Abd. pain better after BM 3-4 days/week	Gluten free diet	4 wks	Not effective						
	Triggers:	Hyoscyamine 0.375mg	1 dose	jittery, didn't work						
	Garlic, onions, eating out	Augmentin 2x daily	14 d	Got C. diff						
	Stress									
3)	Prior testing (results attached) 5) Goal: leave home w/o worrying abou									
-	CBC, CMP, CRP: 10/2019 diarrhea									
	Stool studies: C. diff, fecal calpro - Concerns I have: will this be my life forever?									
	11/2019 - I reatments I'm interested in: dietary options									
	Imaging: CT scan 12/2019 - Treatments I'm NOT interested in: anti-depressants, b/c I don't want depression in my chart and affect my life insurance									
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Making the most of your GI Visit Helpful Resource: ACG's IBS Treatment Checklist



Treatments Placebo Effect

Placebo Effect =

Patient + Positive expectations + Sugar Pill = Positive Effect

Average placebo response in IBS clinical trials?



Patel, et al. Neurogastro and Motility, 2005.

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Treatments Placebo Effect and IBS

If placebo effect can help **4 out of 10** patients with IBS, why bother with \$ medications that can have side effects?



6 out of 10 patients NOT helped by placebo



Approved IBS treatments = **SUPERIOR** to placebo

Treatments Placebo & Nocebo Effects

Placebo Effect =

Patient + Positive expectations + Sugar Pill = Positive Effect

Nocebo Effect =

Patient + Negative expectations + Sugar Pill = Negative Effect

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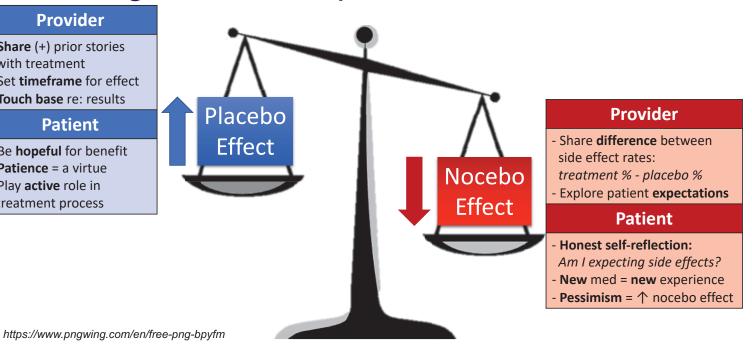
Ideal Treatment Approach Setting ourselves up for success!

Provider

- Share (+) prior stories with treatment
- Set **timeframe** for effect
- Touch base re: results

Patient

- Be hopeful for benefit
- Patience = a virtue
- Play active role in treatment process



Treatments Natural supplements, pre/probiotics

IBS-Diarrhea

Soluble fiber (dissolves in water)

- Powder better than capsules/gummies
- Helps you feel less hungry, ↓ cholesterol, maintain blood sugar
- Examples: psyllium based (Metamucil): most studied
- ? Less bloating: wheat dextrin (Benefiber), methylcellulose (Citrucel)

Prebiotics

- high-fiber foods that feed gut bacteria to maintain healthy balance
- minimally studied in IBS, not better than placebo

Probiotics

- LOTS of various strains/preparations, makes studies hard to interpret
- Not specifically recommended for IBS, very controversial
- Most studied strains in IBS: Lactobacillus. Bifidobacterium
- Visbiome (VSL#3, prescription), Align, Culturelle, Activia® yogurt



Deutsch JK, Levitt J, Hass DJ. Am J Gastro 2020.

https://www.metamucil.com/en-us/products/metamucil-fiber-supplement/orange-smooth, https://www.kroger.com/p/benefiber-sugar-free-fiber-supplement-powder/0088679021830, https://www.cvs.com/shop/citrucel-powder-orange-flavor-fiber-therapy-for-occasional-constipation-relief-30-oz-prodid-347054, https://www.shutterstock.com/search/probiotics+cartoon

Treatments

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Herbals

IBS-Diarrhea

Iberogast (STW5)

- decently studied, ↓ symptoms from IBS and functional dyspepsia
- caution if liver disease, bleeding risk, on anti-anxiety meds

Peppermint oil

- well studied, 1 symptoms from IBS and functional dyspepsia
- · IBgard popular brand, generics also available

Turmeric/Curcumin/Xanthofen

- · fairly studied in IBS, ? anti-inflammatory effects, possible role in mild Crohn's
- possible role in constipation as well, ? prebiotic

Glutamine

- · fairly studied, possible role in post-infectious IBS
- ? restore intestinal permeability or "leaky gut"

Berberine

- fairly studied, \(\) diarrhea frequency, abdominal pain frequency, urgency
- relatively safe



Treatments Natural supplements, pre/probiotics

IBS-Constipation

Soluble fiber (dissolves in water)

- · aim for more water
- · all previous statements apply

Aloe vera

- · Anti-inflammatory and pain relief effect
- · Can affect absorption of many drugs including blood thinners

Pre/Probiotics

- Previous statements apply
- · Would not recommend if a lot of bloating
- Most studied strain in IBS-C: Bifidobacterium animalis

Deutsch JK, Levitt J, Hass DJ. Am J Gastro 2020.

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Treatments Cannabis



- THC = affects receptors in gut AND brain → euphoria, etc.
- CBD = affects receptors in gut but **NOT** brain
- Often supplements have combo %'s of THC + CBD
- Generally
 ↓ GI motility especially stomach
- Promising randomized trial in IBS for ↓ abdominal pain
- STAY TUNED: many more studies to come



Treatments Diet

IBS-Diarrhea

Low FODMAP diet

- F = Fermentable, O D M = Oligo-, Di-, Mono-saccharides and P = polyols
- · very well studied
- NOT A FOREVER DIET!
- restriction phase to see response (2-6 weeks) → re-introduction → personalization

Gluten free diet (if celiac disease ruled out)

- not recommended for IBS: \(\) whole grains important for health
- BUT...some patients without celiac disease may be sensitive to gluten
- the culprit may not be gluten but actually fructan and/or wheat allergy

 Low
 Restrictiveness of Diet
 HIGH

 Whole Grains
 Wheat Free
 Fructan Free
 Gluten Free
 Low FODMAP

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Treatments Diet

IBS-Constipation

"HIGH" FODMAP diet = natural laxatives

- Prunes
- Summer fruits: peaches, watermelon, cherries
- Aloe
- Rhubarb

Low FODMAP

Kiwi



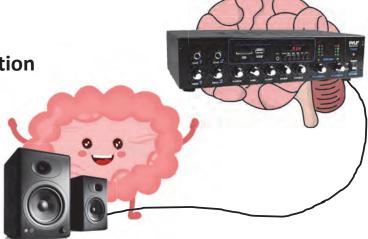
Treatments GI Behavioral Health

Possibly our most effective non-medication option for IBS treatment

• Addresses the Brain-Gut Connection

- Brain = Amplifier

- Gut = Speaker



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Treatments GI Behavioral Health

Cognitive Behavioral Therapy (CBT)

- Number Needed to Treat (NNT) = # patients needed to treat to see benefit
- want low # (like golf)
- anything <10 is GOOD



Treatments GI Behavioral Health

Gut Directed Hypnotherapy

- Not hypnosis like at the state fair
- Tunes down the "amplifier"



Ford AC, et al. Am J Gastro 2019.

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Treatments GI Behavioral Health

- Early adverse life events are associated with IBS
- Include childhood/adult physical and sexual abuse

Treatments Summary IBS-Diarrhea

Go for it! (if your provider approves)

Promising but more data needed

Likely not worth your time/\$

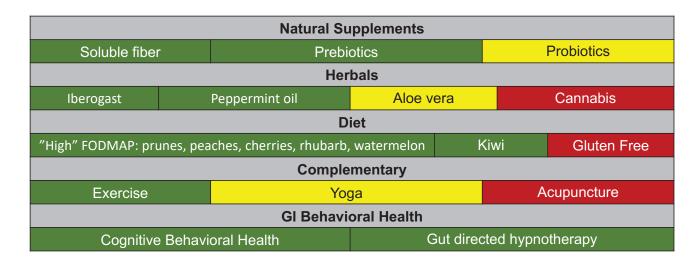
Natural Supplements										
Soluble fiber			Prebiotics		Probiotics					
Herbals										
Iberogast	Peppermi	nt oil	Cannabis	Turmeric/Curcumin		Glutamine	Berberine			
Diet										
Low FODMAP		Wheat free		Fructan free		Gluten free				
Complementary										
Exercise			Yog	а	Acupuncture					
Gl Behavioral Health										
Cognitive Behavioral Health				Gut directed hypnotherapy						

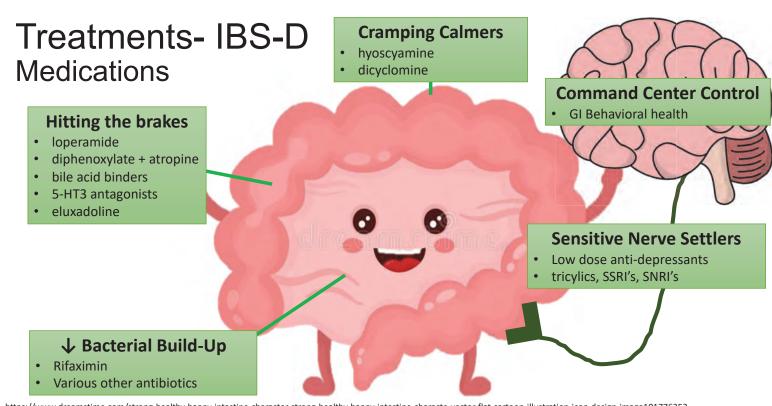
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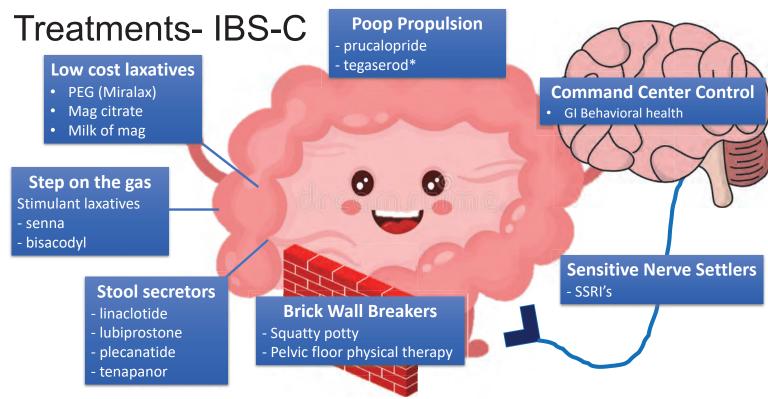
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Summary

Tools for Living your **BEST** IBS Life

- IBS is a problem along Gut-Brain-Microbiome Axis
- Prepare your IBS Snapshot before visit
- Numerous effective treatments
 - Work with your provider to tip the scales in your favor:
 - ↑ Placebo + J Nocebo Effects
 - · Many natural supplements, herbals, diet options worth trying
 - · GI behavioral health is safe and very effective
 - Many prescription meds targeting various mechanisms

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Thank you for listening!



