



Can we talk about ... IBS?

By Scott Vander Wielen, DC

It is estimated that 10 to 20% of the population suffers from irritable bowel syndrome (IBS). By and large, women are afflicted more often than men, and as much as 38% of children suffer from IBS or functional abdominal pain weekly. The medical research admits that finding an effective treatment using medications remains a challenge. The severity of the symptoms associated with IBS varies from person to person, and for years sufferers have been told that little to nothing can be done to help.

If you suffer from IBS, there is hope! There is an effective approach to IBS besides taking prescribed symptom-based medications. What if it were possible to get to the root cause of the IBS so you wouldn't have to deal with all the medications and their side effects, with little or no improvement? Recent medical research shows that lifestyle medicine is the most effective path to managing IBS. Lifestyle medicine uses food, nutrition and lifestyle choices that are based on how your body is functioning. This approach to health is called functional medicine.

So what would the functional medicine approach to IBS look like? We first need to understand that the label of "IBS" says absolutely nothing as to the source of the dysfunction. The "why" and "how" behind the diagnosis of IBS still remains undefined. Answering the "why" and "how" will involve diagnostic testing and asking the right questions. Does the patient have a heavy metal toxicity causing a series of immune and bowel reactions? Does the patient suffer from small intestinal bacterial overgrowth (SIBO)? According to medical research, the odds ratio is 5:1 that SIBO has gone undiagnosed. Is there a vitamin D deficiency which has been shown to be associated with unregulated immune responses? Does the patient have pathogenic organisms, parasites or a gluten sensitivity? Over 90% of patients with gluten sensitivity are undiagnosed. Is there gall bladder dysfunction or pancreas dysfunction? The list of possibilities is extensive and needs to be sorted out so the "why" and "how" can be defined. The patient's medical history and family history are also significant and can answer as much as 90% of the mystery behind the "why" and "how". Lastly, a detailed physical exam should be performed. Once this has been completed, a therapeutic target can be established and an effective treatment plan can be designed and implemented using lifestyle changes, nutrition and food.

Food choices will affect symptoms for IBS. FODMAP, which stands for Fermentable Oligo-Di-Monosaccharides and Polyols, is an acronym that was coined to describe different kinds of carbohydrates and sugar alcohols (polyols). They comprise fructose, lactose, fructo-, fructans and galactans, and alcohol sugars such as sorbitol, mannitol, xylitol and maltitol, all of which affect our digestion differently. FODMAPs are poorly digested in the small intestine, are rapidly fermented and can significantly worsen many of the IBS symptoms, including constipation.



A top tier medical journal published a study in 2010 concluded that a low FODMAP diet improves IBS symptoms, which include abdominal discomfort, abdominal bloating, excessive flatulence, nausea, heartburn and tiredness. A complete list of high FODMAP and low FODMAP foods can be downloaded free for your review at www.HealthyMeToday.com.

If you suffer from IBS, Crohn's, colitis or other gastrointestinal discomfort, then consider a functional medicine approach to managing and resolving your condition and feel better! Vander Wielen Health & Wellness Diagnostic Center is offering complimentary presentations during the month of March focusing on the functional medicine approach to IBS and IBS-related conditions. For more information visit us at www.HealthyMeToday.com.

References:

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