CORRESPONDENCE

Content

Response to "Pathologies in Irritable Bowel Syndrome"

Response to "Pathologies in Irritable Bowel Syndrome"

It is heartening to see a keen interest in our article titled "Frequency of organic pathologies in Irritable Bowel Syndrome patients" published in JPMI 2009;23(4);34-46².

Irritable Bowel Syndrome (IBS), by definition encompasses a symptom complex of altered bowel habits with abdominal pain / discomfort without any organic cause³⁻⁶. However, it is a well established disease entity with well defined diagnostic criteria⁷⁻⁸ and population based studies conducted in the developed countries with large number of patients have shown that it is predominantly affecting females⁹.

The primary objective of our study was to know the frequency of organic pathologies in patients meeting symptoms based criteria for IBS. As it was a hospital based study, so the number of patients was quite low i.e. 85 with a majority of male patients. The male to female ratio was 4:1. These findings were not consistent with the findings of the literature from the developed countries of the west, where females are affected predominantly by IBS. The first plausible explanations to this finding may have been the fact that this was not a population based study and the number of patients was quite low. Secondly, there has been a trend noted in the Asian population with more male patients being diagnosed as IBS¹⁰.

The second interesting fact is the association of anxiety, depression and other psychiatric disorders with IBS and it is rightly pointed out that the prevalence of psychiatric disorders would have been more than the present percentages, if proper diagnostic criteria would have been used for the assessment of the psychiatric illnesses. As mentioned earlier, this was not our aim of study and to diagnose a patient with a psychiatric illness, we referred them to the out-patient department of psychiatry, Hayatabad Medical Complex for evaluation by a psychiatrist.

In a nutshell, large population based studies need to be conducted in future with the aim to know the gender prevalence of IBS patients

Address for Correspondence: Dr. Ijaz Mohammad Khan

Professor and Head Department of Gastroenterology, Hayatabad Medical Complex Peshawar - Pakistan and the association of IBS with psychiatric illnesses in our society.

REFERENCES:

- Azeemi MM. Pathologies in Irritable Bowel Syndrome. J Postgrad Med Inst 2010;24:79-80.
- Khan IM, Hassan MK, Rehman S, Javed M, Khattak AK, Hameed K, et al. Frequency of organic pathologies in patients with irritable bowel syndrome. J Postgrad Med Inst 2009;23:341-6.
- 3. Saito YA, Talley NJ, Melton L, Fett S, Zinsmeister AR, Locke GR. The effet of new diagnostic criteria for irritable bowel syndrome on community prevalence estimates. Neurogastroenterol Motil 2003;15:687-94.
- 4. Andrews EB, Eaton SC, Hollis KA, Hopkins JS, Ameen V, Hamm LR, et al. Prevalence and demographics of irritable bowel syndrome: results from a large web-based survey. Aliment Pharmacol Ther 2005;22:935-42.
- Hungin AP, Chang L, Locke GR, Dennis EH, Barghout V. Irritable bowel syndrome in the United States: prevalence, symptom patterns and impact. Aliment Pharmacol Ther 2005;21:1365-75.
- 6. Minocha A, Johnson WD, Abell TL, Wigington WC. Prevalence, sociodemography and quality of life of older versus younger patients with irritale bowel syndrome: a population-based study. Dig Dis Sci 2006;51:446-53.
- Longstreth GF, Thompson WG, Chey WD, Houghton LA, Mearin F, Spiller RC. Functional bowel disorders. Gastroenterology 2006:130:1480-91.
- 8. Thompson WG, Longstreth GF, Drossman DA, Heaton KW, Irvine EJ, Muller-Lissner SA. Functional bowel disorders and functional abdominal pain. Gut 1999;45:1143-7.
- 9. Brandt LJ, Bjorkman D, Fennerty MB, Locke GR, Olden K, Peterson W, et al. Systematic review on the management of irritable bowel syndrome in North America. Am J Gastroenterol 2002:97:7-26.
- 10. Jafri W, Yakoob J, Jafri N, Maloni M, Shah HA, Hamid S, et al. Diagnosis of Irritable Bowel Syndrome in patients evaluated for organic bowel pathology. J Coll Physicians Surg Pak 2004;14:438-9.