

## Irritable bowel syndrome: A clinical review

Rosa LS Soares

Rosa LS Soares, Internal Medicine Department, Faculty of Medicine, Federal Fluminense University, Rio de Janeiro 24030-210, Brazil

Author contributions: Soares RLS contributed to the manuscript. Correspondence to: Rosa LS Soares, MD, PhD, Department of Clinical Medicine, Federal Fluminense University, Marques do Parana 303, 24030-210 Niterói, Rio de Janeiro, Brazil. [rosaleonora@gmail.com.br](mailto:rosaleonora@gmail.com.br)  
Telephone: +51-21-26299016 Fax: +51-21-26299017  
Received: December 18, 2013 Revised: February 9, 2014  
Accepted: May 19, 2014  
Published online: September 14, 2014

### Abstract

Irritable bowel syndrome (IBS) remains a clinical challenge in the 21<sup>st</sup> century. It's the most commonly diagnosed gastrointestinal condition and also the most common reason for referral to gastroenterology clinics. Its can affect up to one in five people at some point in their lives, and has a significantly impact of life quality and health care utilization. The prevalence varies according to country and criteria used to define IBS. Various mechanisms and theories have been proposed about its etiology, but the biopsychosocial model is the most currently accepted for IBS. The complex of symptoms would be the result of the interaction between psychological, behavioral, psychosocial and environmental factors. The diagnosis of IBS is not confirmed by a specific test or structural abnormality. It is made using criteria based on clinical symptoms such as Rome criteria, unless the symptoms are thought to be atypical. Today the Rome Criteria III is the current gold-standard for the diagnoses of IBS. Secure positive evidence of IBS by means of specific disease marker is currently not possible and cannot be currently recommended for routine diagnosis. There is still no clinical evidence to recommend the use of biomarkers in blood to diagnose IBS. However, a number of different changes in IBS patients were demonstrated in recent years, some of which can be used in the future as a diagnostic support. IBS has no definitive treatment but

could be controlled by non-pharmacologic management eliminating of some exacerbating factors such certain drugs, stressor conditions and changes in dietary habits. The traditional pharmacologic management of IBS has been symptom based and several drugs have been used. However, the cornerstone of its therapy is a solid patient physician relationship. This review will provide a summary of pathophysiology, diagnostic criteria and current and emerging therapies for IBS.

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**Key words:** Irritable bowel syndrome; Clinical review; Pathogenesis; Diagnostic; Treatment; Biopsychosocial model

**Core tip:** Irritable bowel syndrome (IBS) remains a clinical challenge in the 21<sup>st</sup> century. Various mechanisms and theories have been proposed about its etiology, but the biopsychosocial model is the most currently accepted. Today the Rome Criteria are the current gold-standard for the diagnoses of IBS. Traditional management of IBS has been symptom based and several drugs have been used. However, the cornerstone of its therapy is a solid patient physician relationship. This review will provide a summary of pathophysiology, diagnostic criteria and current and emerging therapies for IBS.

Soares RLS. Irritable bowel syndrome: A clinical review. *World J Gastroenterol* 2014; 20(34): 12144-12160 Available from: URL: <http://www.wjgnet.com/1007-9327/full/v20/i34/12144.htm> DOI: <http://dx.doi.org/10.3748/wjg.v20.i34.12144>

### INTRODUCTION

The functional gastrointestinal disorders (FGIDs) are a heterogeneous group of chronic conditions that are considered important to public health because they are remarkably common, can be disabling, and induce a major