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# Soothing solutions for irritable bowel syndrome

***Adopting these strategies can help treat and manage this common digestive condition.***

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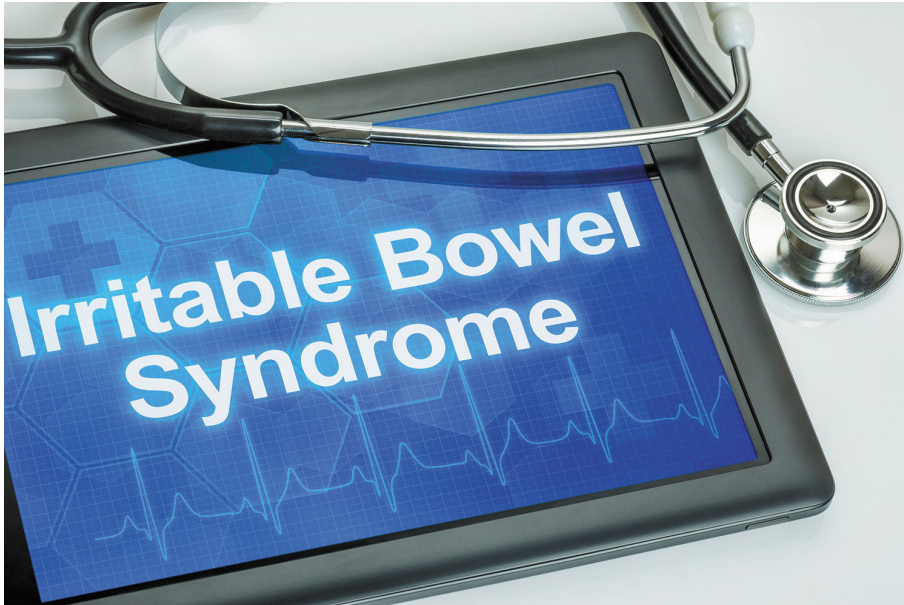


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Many older men struggle with intermittent stomach symptoms for many years without a diagnosis. They might have cramping, excessive gas, bloating, constipation, or bouts of unexplained diarrhea — or some combination. If these problems started when you were much younger, you likely have irritable bowel syndrome, or IBS.

"IBS is most common in people in their 30s and 40s; however, it can occur at any age," says Dr. Anthony Lembo, a gastroenterologist with Harvard-affiliated Beth Israel Deaconess Medical Center. "Since older individuals, including men, tend to have greater problems with constipation or diarrhea, it is particularly important that they are aware of IBS."

The good news is that while IBS can be uncomfortable and distressing, it does not permanently harm the intestines or lead to a more serious condition, such as inflammatory bowel disease or colon cancer. IBS cannot be cured, but it can be well managed so it does not interfere with your overall health and quality of life.

## A functional disorder

IBS is a gastrointestinal disorder that affects the small and large intestines. With IBS, your gut becomes more sensitive, and the muscular contractions of your intestines don't work the way they should.

IBS is referred to as a functional disorder, which means that there is nothing wrong with the actual structure of your bowel. Rather, the problem lies with how it is working. People with IBS usually have multiple symptoms, including

- abdominal pain and cramping that are related to abnormalities in bowel movements, such as constipation, diarrhea, or both
- constipation (often with incomplete bowel movements)
- diarrhea (often with an urgent need to move the bowels)
- alternating constipation and diarrhea

You should see your doctor if you have persistent gastrointestinal symptoms, particularly if they are new, if you notice blood in your stools or unintentional weight loss, or if you have a family history of colon cancer or inflammatory bowel disease.

Because no one knows what causes IBS, it is impossible to prevent. "Once you have been diagnosed, the goal is to manage the condition," says Dr. Lembo. You can do this by identifying specific triggers of your symptoms and then adopting strategies to make symptoms less severe and frequent. The most common treatments are related to diet, stress management, and medication.

### IBS subtypes

There are three subtypes of IBS. About an equal number of people have each kind.

**Constipation-predominant IBS (IBS-C)** is marked by infrequent bowel movements, lumpy or hard stools, stomach pain and discomfort, bloating, and straining during bowel movements.

**Diarrhea-predominant IBS (IBS-D)** comes with regular bowel movements, loose and watery stools, and constant feelings of urgency.

**Alternating type IBS (IBS-A)** involves dealing with episodes of both constipation and diarrhea. It's common for people with IBS-A to go back and forth between the two.

## Diet

What you eat (and what you don't) has the biggest impact on IBS symptoms. Avoiding or reducing trigger foods linked with IBS symptoms is a good first step. These include chocolate, alcohol, caffeine, dairy products, and fried and fatty foods. "Also, you should consider avoiding soft drinks, fruit juices, and sport drinks," says Dr. Lembo.

You also may benefit from adopting a low-FODMAP diet. FODMAP stands for fermentable oligosaccharides, disaccharides, monosaccharides, and polyols. These are short-chain carbohydrates that are poorly absorbed in the gut and can cause problems like diarrhea, bloating, abdominal pain, and flatulence. A meta-analysis in the January 2017 *Gastroenterology & Hepatology* found that 50% to 86% of people with IBS respond well to a low-FODMAP diet.

Your doctor can help you adopt a low-FODMAP diet. (You can find an example at [www.health.harvard.edu/fodmap](http://www.health.harvard.edu/fodmap).) The diet works in two phases. First, you eliminate all FODMAPs from your diet for two to four weeks. Second, you gradually reintroduce specific FODMAPs one by one over a period of six to eight weeks, according to your tolerance.

Your doctor may want you to keep a food diary and symptom chart to help identify problem foods and quantities. "The goal is to find which foods trigger your IBS symptoms, so you can limit or eliminate them in your diet," says Dr. Lembo.

## Stress management

Anything you can do to manage your stress levels can help control your emotional response to IBS. Stress not only can trigger symptoms, but often make them worse and longer-lasting. Here are some strategies that may help with IBS-related stress.

**Yoga.** A 2015 study in the *European Journal of Integrative Medicine* found that people with IBS who took an hour-long yoga class three days a week for 12 weeks had less severe symptoms and improved quality of life. The researchers noted that the combination of yoga postures and breath control exercises worked to help alleviate stress and reduce anxiety related to IBS.

**Meditation.** In a 2015 study in the journal *PLOS ONE*, people with IBS attended a weekly relaxation program that included meditation and breathing exercises and were encouraged to practice the routine for 15 to 20 minutes every day at home. After nine weeks, the group reported much lower levels of IBS-related anxiety.

There are many online instructions that teach you the basics of meditation. Local yoga studios also offer beginning and intermediate meditation classes.

**Cognitive behavioral therapy (CBT).** The goal of CBT is to help you increase awareness of your thoughts and behavior and learn how to change your reactions to stressful situations. A 2015 study in *Clinical Gastroenterology and Hepatology* found that four weeks of CBT sessions reduced symptom severity among IBS patients and that the effect lasted up to three months.


## Medication and supplements

Your doctor may recommend over-the-counter remedies, like fiber supplements and laxatives to help with constipation, or loperamide to help with diarrhea. Depending on your symptoms, your doctor may prescribe other medications to help ease and control symptoms.

Another possible option is probiotics, which are live microorganisms that can help restore the balance of bacteria in the gut and possibly enhancing the immune system.

It's unclear whether certain strains of probiotics are beneficial for people with IBS. The FDA does not regulate these products for label accuracy, so don't take them without first checking with your doctor.

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