

Irritable bowel syndrome questionnaire pdf



International Journal of Care Scholars 2018;1(2)

Prevalence of Irritable Bowel Syndrome and its Association with Perceived Stress Level at The International Islamic University Malaysia among Nursing Students

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ABSTRACT

ABSTRACT Objective: This study aims to determine the prevalence of irritable bowel syndrome (IBS) and its association with perceived stress levels among nursing students at the International Islamic University Malaysia. Methods: A cross-sectional design was used in this study. A three-part questionnaire was used to gather data on stress levels and IBS symptoms. Part A posed questions on socio-demographic aspects. In part B, a Perceived Stress Scale was used to measure individuals' perceived stress. Part C used a questionnaire developed by the World Gastroenterology Organisation (WGO) with the support of Danone. Results: The response rate was 85.5%: out of 200 students, 171 completed the questionnaires. According to the results, there is a significant relationship between stress levels and IBS (θ_0 , 39.7%). There is no association between the characteristics of subjects with IBS and their level of stress (P > 0.05). Conclusion: The prevalence of IBS among the students in this study was roughly moderate. The frequency of moderate stress levels was high and there was a significant spociated with IBS and stress level (SL).

KEYWORDS: Prevalence, Irritable bowel syndrome, Perceived stress level

INTRODUCTION

prive	table bowel syndrome (IBS) is a disease that esents in different ways. The major symptoms IBS are abdominal pain, bloated stomach, arrhoea and constipation (1). The frequency and tensity of IBS symptoms may vary from day to y, or even from month to month, and may use distress and disruptions to people's eryday lives (2). Other symptoms that company the main symptoms are mucus stools, eling of incomplete evacuation, urgency and tching. Providing a set definition of IBS is ficult because IBS is a clinical diagnosis. The st way to identify IBS is by understanding its teria (3). Some causes of IBS are psychological, thas stress, anxiety, and depression, and some e physiological, such as dysregulation of brain- t axis and gut motility. Stress is an external imulus that affects the physiological and cychological responses IBS is the most common agnosis made by gastroenterologists, where 12% IBS patients visiting a primary care unit (4), ress can be defined as a condition or feeling at is experienced when an individual feel that as to denanded of them is beyond their ability, when they feel the situation they are beyond eir control (5). Stress is a typical reaction to ternal stressors e.g. students facing heavy study	to uncontrolled stress, which causes develop other illnesses (6). This c. study aims to determine the prirritable bowel syndrome and its ass perceived stress levels among nursin the International Islamic University M METHODS A cross-sectional design was used in This study has been approved by in (Faculty) of Nursing Research Comm and the IIUM. Research Committee (participating in the study, all parti- given a consent form to sign to voluntary participation in the study, questionnaire was used to gather d levels and IBS symptoms. Part A po- on socio-demographic aspects such year of study, marital status, smokin lifestyle. In part B, a Perceived Stre- used to measure individual's perceive The scale measures nonspecific per and has been used in many studies stressfulness of situations and the eff interventions. The questionnaire utili Likert scale which each participant assessment score, all scales were of	
Em Tel Sin Phi	orresponding Author wall: sinanpharmacy@gmail.com 1: 009647701611876 wan Mohammed Abdullah Al-Mahmood armacy College, Al-Kitab University kuk, Iraq	divided into three categories of stress medium, and high. Part C used a c developed by the World Gast Organisation (WGO) with the suppor (8). The scoring system of this quest follows: a score of 25-30 means the p likely to be suffering from IBS. A sc means the participant may suffer fro score below 15 indicates that the	

workloads. It is normal to experience stress when studying, but low resistance to stressors may lead to uncontrolled stress, which causes individuals to develop other illnesses (6). This cross-sectional study aims to determine the prevalence of irritable bowel syndrome and its association with perceived stress levels among nursing students at the International Islamic University Malaysia.

in this study, the Kulliyyah mittee (KNRC), ((REC), Before ticipants were to show their y, A three-part data on stress osed questions ch as gender, king status and tress Scale was ived stress (7), erceived stress to assess the ffectiveness of lised a 5-point marked with 0-ute the total compiled and ess level; mild, a questionnaire astroenterology ort of Danone stionnaire is as

follows: a score of 25-30 means the participant is likely to be suffering from IBS. A score of 15-24 means the participant may suffer from IBS and a score below 15 indicates that the participant's

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Manning Criteria in Irritable Bowel Syndrome: Its Diagnostic Significance

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Background: Irritable bowel syndrome is one of the most commonly encountered gastrointestinal disorders, for which there are no established diagnostic criteria. Thus, a diagnosis of IBS is made by exclusion of any organic diseases. Recently, important attempts for the positive diagnosis of irritable bowel syndrome by questionnaire surveys of physical symptoms have been made. We performed a questionnaire survey to evaluate the diagnostic value of the Manning criteria and to observe the major symptoms in irritable bowel syndrome.

Methods: A symptom questionnaire which consisted of 22 items, including 6 cardinal symptoms of the Manning criteria, were answered by 172 outpatients who had gastrointestinal complaints. According to a final diagnosis based on independent clinical evaluation, all patients were categorized in three groups: irritable bowel syndrome group, nonulcer dyspepsia group and organic gastrointestinal disease group. The results of the questionnaire were analyzed for each group.

Results The sensitivity and specificity of the Manning criteria for the diagnosis of irritable bowel syndrome were 67% and 70% if three or more items were regarded as positive. The mean score and overall frequency of the Manning criteria were significantly higher in irritable bowel syndrome group than in nonulcer dyspepsia (p < 0.01) or organic gastointestinal disease group (p < 0.05) Among subgroups of the irritable bowel syndrome group showed a significantly higher score and overall frequency than the pain-predominant subgroup showed a significantly higher score and overall frequency than the painless subgroup(p < 0.05).

Conclusions The Manning criteria would be useful as a simple and reliable backup tool for the diagnosis of irritable bowel syndrome and seem to be more useful in painpredominant subgroup. More detailed history-taking should prevent unnecessary extensive investigations for the diagnosis of irritable bowel syndrome.

Key Words: Irritable bowel syndrome (IBS), Manning Criteria

INTRODUCTION

any organic gastrointestinal diseases with similar symptoms. It is amazing to see the expensive, dangerous

Irritable bowel syndrome (IBS) is a very common clinical condition characterized by abdominal pain and alteration of bowel habits, or both, as the main symptoms. But these symptoms are also common in organic gastrointestinal diseases, and there are no established pathophysiologic mechanism and diagnostic procedure in IBS. Thus, a diagnosis of IBS is generally made by exclusion of

Address reprint requests to: Hyeok Jeong, M.D., Department of Internal Medicine, College of Medicine, Chung-Ang University, 65-207, 3-Ga Hangang-Ro, Yongsan-Ku, Seoul, 140-013, Korea and extensive workups to which healthy patients are subjected by physicians searching for an organic cause in patients who obviously suffer from IBS. It is difficult to decide how extensive investigations should be before the diagnosis of IBS may be accepted with reasonable confidence. To overcome this obstacle, important attempts for positive diagnosis of IBS from physical symptoms have been made by questionnaire surveys¹⁻⁴⁰. The application of refined symptoms criteria, selected

from questionnaire surveys, may permit a more positive diagnosis of IBS and may help minimized



ASTR BIOINAL ARTICLE

Validation of the Korean version of visual analogue scale for irritable bowel syndrome questionnaire for assessment of defecation pattern changes

ol Yoo¹, Boram Park², Jungnam Joo², Jung-Sup Kim², Yumi Lee⁴, Myong Im Kang⁸, Kyu Joo Park⁷



Irritable bowel syndrome quality of life (ibs-gol) questionnaire. Irritable bowel syndrome questionnaire pdf. An irritable bowel syndrome-specific symptom questionnaire development and validation. Ibs symptom questionnaire.

People with IBS have structurally typical bowel tissue, while those with IBD do not. What Causes IBS? The distinct cause of irritable bowel syndrome is unknown. If you've been diagnosed with IBS, it's important for you to learn about your condition so that you can take charge of your symptoms. It typically begins in late adolescence or adulthood, and, although it impacts people of all genders, it is twice as likely to affect women than men. Often referred to as IBS, the syndrome can cause intestinal discomfort and other uncomfortable symptoms, but it's not clear if IBS causes permanent damage to the gastrointestinal (GI) tract or colon. Stress-related conditions can worsen, occurring more intensely and frequently, over time. IBS should not be confused with IBD, otherwise known as inflammatory bowel disease. Researchers believe it is the combination of genetics and environmental factors that ultimately leads to development of the condition. Mental Health: Those with chronic anxiety, depression, or a history of physical, sexual, or emotional abuse have an increased risk of developing IBS symptoms. In addition to these risk factors, those with IBS may be aware of certain triggering activities or foods that you can try to avoid them, can be helpful. Typically, mild cases of IBS can be controlled by making adjustments to one's diet, lifestyle, or stress management plan. Treatment suggestions include: Taking fiber supplements or eating high-fiber foods Over-the-counter anti-diarrheal medications Avoiding foods that cause bloating or gas, such as carbonated beverages, alcohol, gluten, certain fruits and vegetables, and dairy products Increasing daily water intakeAnticholinergic medications, such as dicyclomine, to relieve painful bowel movementsAntidepressants to treat depression and pain associated with IBSAntibiotic medications if an overgrowth of bacteria is presentMedications to increase the fluid production in the small intestine that aids in the passage of stoolCounseling, especially if stress is a trigger for your IBSHome RemediesSimple alterations in one's lifestyle may provide much needed relief of the symptoms associated with irritable bowel syndrome. Typically, tests are performed to rule out any underlying conditions that may be producing similar symptoms. improve the symptoms associated with irritable bowel syndrome. Irritable bowel syndrome is not a disease - rather, it's a collection of symptoms if you have IBS, but you should be aware that they may upset your GI system. How Is IBS Diagnosed? There is no single test specifically designed to diagnose irritable bowel syndrome. Symptoms vary greatly from patient to patient, so while some individuals will experience symptoms on a more consistent basis. Symptoms of irritable bowel syndrome may include: Pain or cramping in the abdomenWeight lossGas and bloatingFeeling of fullnessAbdominal painBleeding from the rectumLoose or watery stoolsConstipationBouts of diarrhea followed by constipation, or diarrhea, or a mix of both gastrointestinal symptoms. Risk Factors & TriggersWhile there is no distinct cause for IBS, certain risk factors may predispose a person to developing the symptoms associated with this condition. Manage your stress and diet. Photo Courtesy: Moyo Studio/E+/Getty Images Irritable bowel syndrome is a common disorder of the gastrointestinal tract that impacts the large intestine. Positive coping mechanisms for stress include: Counseling or therapyRelaxation exercises such as meditationDeep breathingExerciseIn addition, food choices may impact the severity of your flare-ups, as mentioned above. Tips for Living with IBSLiving with IBSLiving with irritable bowel syndrome can be a difficult day-to-day challenge. These tests may include: ColonoscopyX-rayCT scanUpper GI series or endoscopyBacterial overgrowth breath testsLactose intolerance testsBlood testsStool culturesPhoto Courtesy: Charday Penn/E+/Getty Images IBS TreatmentsBecause irritable bowel syndrome does not have a singular cause and cannot be cured, most treatment options aim to manage the symptoms associated with IBS. Healthcare professionals believe the cause may be a combination of environmental, physical, and genetic factors. The diagnosis of IBS relies largely upon a complete and thorough medical history, review of symptoms, and physical examination. To aid in the diagnosis, researchers have created a set of criteria called the Rome criteria. Some home remedies to consider include: Avoiding foods that worsen symptomsEating small, more frequent meals Choosing dairy products carefully, especially in cases of lactose intoleranceDrinking plenty of water each day Exercising daily to relieve stress-associated symptomsUsing anti-diarrheal medications with caution (Note: If overused, these medications can worsen symptoms.) Adding fiber to your diet, in the form of whole grains, vegetables and fruitsCan You Prevent IBS? The best way to prevent IBS? The best way to prevent flare-ups of irritable bowel syndrome? And, lastly, finding community with an IBS support group can help you develop new coping mechanisms. Resource Links: MORE FROM SYMPTOMFIND.COM These include: Age: Most people experience the first symptoms of IBS under the age of 50. Assigned Sex at Birth: IBS occurs more commonly in females than males. Functional GI disorders produce frequent symptoms but do not cause lasting damage to the GI tract. Some of these triggers are: Periods of Increased Stress: Both temporary and chronic stress can lead to an increase in IBS symptoms, however these stresses typically just exacerbate existing symptoms after eating certain irritating foods, such as spicy food, greasy food, dairy products, certain citrus fruits, and wheat products. Furthermore, it is possible that the connection between the brain and the gastrointestinal system, also known as the brain-gut interaction, plays a role in this disorder. Conditions associated with IBS include: Motility changes in the GI tract, including spasms Hypersensitivity of the bowels History of psychological problems such as anxiety, depression, PTSD, and panic disorderInfection in the stomach caused by bacteriaAn overgrowth of otherwise normal bacteria in the small intestine, known as SIBOA change in hormones during menstruation, menopause, or ovulationSensitivity to certain foodsStressful events, including trauma or abuseSymptoms Associated With IBSThe symptoms associated with IBS can range from mild to severe, with the majority of patients experiencing mild to moderate symptoms. In order to be diagnosed with irritable bowel syndrome, you must have pain in the abdomen or abdominal discomfort at least one day per week in the prior 12 weeks, and two or more of these additional symptoms: Pain with defecation Change in the frequency of bowel movements Changes in the consistency of your stool Additional diagnostic tests may be utilized to rule out underlying causes of symptoms — or to check for possible infection. IBS is categorized by a change in gastrointestinal (GI) tract function, making it a functional gastrointestinal tract disorder. Menopausal people who are on an estrogen replacement therapy tend to have an increased risk of developing IBS as well. Family History: Those who have a close relative with IBS, such as a parent or sibling, are more likely to develop IBS symptoms.

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