

What is Irritable Bowel Syndrome [IBS] and How Does the Patient Present to a Doctor

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I would like to enlighten the readers on the subject of Irritable Bowel Syndrome [IBS] before presenting the case study and human behaviour.

Irritable Bowel Syndrome is accepted all over the world as a psychosomatic disorder. 'Somatic' means organic and in a way it is called as a psycho-organic disorder. I would simplify this further. The organic effect is observed but the cause is psychological, meaning their reasons are developed in the mind. This is not as simple as it looks; in fact it is the most difficult type than even the other organic diseases. Now the term psychosomatic is replaced with the diagnostic category 'Psychological', the factors affecting the physical condition. Psychosomatic medicine emphasizes the unity and the interaction between the mind and the body.

In general the conviction is that the psychological factors are important in the development of all the diseases whether the role is in the initiation, progression, aggravation or exacerbation of a disease has been open to debate and varies from disorder to disorder. The term 'psychosomatic' has become a part of the larger concept of the behavioural medicine. The behavioural medicine is defined as the interdisciplinary field concerned with the development and the integration of behavioural and bio-medical science, knowledge technique, relevant to

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health and illness. Application of this knowledge and these techniques are for prevention, diagnosis and rehabilitation.

With the progress of the science of psychology and behavioural medicine, now it is known that many diseases and disorders of the organs are listed in 'psychosomatic' disorders. Coronary artery disease, diabetes mellitus, duodenal ulcer, ulcerative colitis, bronchial asthma, spastic colitis, psoriasis besides many others are now included in the psychosomatic disorders. In all these conditions the psychological factors do play a pivotal role besides the other factors and causes. A degree of psychological factors and other causes varies from diseases, disorders and from individual to individual. The emphasis is now given more to the control of psychological factors.

Irritable Bowel Syndrome consists of a group of symptoms suggestive of the dysfunction in absence of the demonstrable organic pathology. In this disorder the patients normally have the following symptoms:

Abdominal pain or discomfort: Normally dull or colicky in nature and lasts for minutes or hours. Defaecation or passage of flatus usually relieves it, though occasionally precipitated or aggravated, pain may be food related occurring soon or several hours after eating.

Bowel disturbance: Frequent urge to defaecate stools which may be loose, formed or even pellets. Patient often experiences desire to defaecate several times on in the

morning and even after breakfast (Morning rush syndrome). Patient may use the word constipation to express the sensation of incomplete evacuation. Passage of mucus is common.

Abdominal distension: Sense of abdominal distension is complained by many as usually associated with constipation. Other symptoms such as nausea, difficulty in swallowing, urinary frequency and urgency in females may be present.

Irritable Bowel Syndrome prevalence is very high all around the world. The role of the gastroenterologist is very limited; the role is only to rule out any organic disease and besides that the patient should be referred to a counsellor psychologist. The gastroenterologist only advises not to keep tension and tell the patient to perform yoga and meditate and prescribe some digestive tablets and tonics.

Normally the patients come to us after suffering from the failure of the various pathies, doctors etc. In majority of such cases the problem begins from a very young age, persists through early adulthood and prolong and even worsen in adulthood. By the time they come to us they have their own diagnosis, which are induced by many quacks and others and even by themselves. There is one wrong notion where many a people feel that 'if bowels are clear, the day would pass excellent'.

They say 'doctor I am suffering from chronic dysentery, 'amoebiasis' and my digestive system is weak and my intestine has also become weak. I cannot tolerate certain food and I have a chronic gas problem, constipation etc'. They say that they get disturbed and feel very uncomfortable even with diarrhoea. They do not want constipation and neither the frequency of the stools should

be more. They say that the doctors say that their reports are normal, they feel so weak. When pointed out that if their digestive system is weak and the appetite is less then how come they are over weight?

In all the current literatures, medical books the emphasis is given on psychotherapy and other techniques and modalities and by using hypnotherapy as a powerful tool to reach suggestive to the subconscious, the remarkable, durable, long lasting and even curable results are obtained.

The patients are treated with ego strengthening technique, assertive therapy, psychotherapy, cognitive restructuring etc with the help of Hypnotherapy.

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