

## DIGESTION TROUBLES GET MORE ATTENTION

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**SCIENCE** Brynna Mathews began having intestinal problems in her early 20s. The onset was gradual, but eventually the bloating, cramping, intestinal pain and frequent bouts of diarrhea started making life difficult.

Her primary-care doctor sent her to a gastrointestinal specialist who ran a slew of tests, but found nothing physiologically wrong with her. "They just told me I had irritable bowel syndrome and that was that," said Mathews, now 30. "They told me to avoid certain foods, eat a lot of fiber, and **get** a lot of rest. They told me there's not a lot that I could do for it."

For **many** years, patients with complaints like those of Mathews have been given the same advice, or told their intestinal problems were mostly in their heads.

But now, the pharmaceutical industry has discovered that millions of Americans have chronic diarrhea, constipation, or cramping. The only two drugs approved for treatment so far Zelnorm for constipation and Lotronex for severe diarrhea have left patients, doctors, and companies searching for **more**.

According to several studies, 10 percent to 15 percent of Americans have irritable bowel syndrome, although **most** cases go undiagnosed. One study found that IBS accounts for nearly one-third of all patients seen by gastroenterologists and up to 12 percent of those seen in primary-care practices. About two-thirds of patients are women.

Mathews, a massage therapy student from Acton, said the condition interferes with her life and makes it difficult to go out. "I have to be near a bathroom a lot of the time," she said. Out of frustration, she recently enrolled in a study designed to see if acupuncture can help control IBS. "I was willing to try anything," she said.

The doctor in charge of that study, Anthony Lembo of Beth Israel Deaconess Medical Center, said he's also frustrated by the lack of good options for IBS patients. Lembo, a leading authority on IBS, decided to examine acupuncture after several smaller studies suggested it might be effective.

IBS apparently stems from a disturbance in the interaction between the gut, the brain and the autonomic nervous system that regulates the digestive tract. Research is focusing on controlling diarrhea and constipation, and also on the brain-gut connection and the regulation of serotonin levels in the intestines. The serotonin levels of IBS patients are believed to be out of whack, leaving them with gastrointestinal systems that work either too slowly or too fast.

Medical understanding of the disease is complicated by the fact that, for years, **many** doctors had dismissed the condition as being psychosomatic, particularly because symptoms can be exacerbated by stress. **Many** patients were told it was "all in their heads," and often were referred for psychiatric help.

Currently, however, doctors agree IBS is quite real, though there is a psychological component to it.

Dr. Robert Burakoff, clinical director of gastroenterology at Brigham and Women's Hospital, said tests have shown that patients diagnosed with IBS are **more** susceptible to gastrointestinal pain than those who don't have the condition. But the pain is real.

"It isn't just a psychological disorder," Burakoff said. "I think people thought of it that way because it mostly affected women."

IBS's reputation as a psychosomatic disorder is boosted by the fact that a significant percentage of patients have some psychological issues as well.

"There are psychological factors such as trauma that have been shown to be associated with some people who have these symptoms, but that's not true in everyone," Burakoff said. "Some patients develop anxiety and depression because they are dealing with discomfort. And some patients don't have any psychological symptoms."

Sarah Wiesbrock, 33, of Jamaica Plain gave up a stressful job as a biomedical researcher, hoping it would give her relief from the constipation and abdominal pain of IBS.

"The hours were long and it was very stressful," said Wiesbrock, also one of the subjects in Lembo's 250-person acupuncture study.

But, although she is now working as a graphic designer, her symptoms remain.

She has held off taking Zelnorm because she doesn't like the idea of taking medication long term. "That's why I'm trying acupuncture. I want to exhaust every possibility."

Zelnorm, which has been running an aggressive ad campaign showing women with their symptoms written on their bared bellies, is manufactured by Novartis Pharmaceuticals Corp., which expects to sell \$1 billion worth of the drug this year.

Two years ago, the Food and Drug Administration restricted Lotronex, made by GlaxoSmithKline, only to IBS patients with severe symptoms because of potential life-threatening side effects, including colitis and constipation. The FDA also agreed to continue reviewing the drug to better identify patients **most** at risk.

One study estimates that IBS costs the national health care system \$8 billion per year, but **many more** may be suffering in silence. A 2004 survey of 1,000 Americans, conducted for the International Foundation for Functional Gastrointestinal Diseases, an advocacy group, found 13 percent of respondents had symptoms suggestive of IBS, but 39 percent of those with such symptoms had not seen a doctor about their problems.

That's unfortunate, Lembo said, because, while there is no perfect treatment, there are things that can help, including drugs, and complementary and alternative therapies, such as hypnotherapy, tai chi, yoga and meditation.

Lembo said he hopes that Zelnorm's recent saturation advertising will at least serve to raise awareness about the illness and encourage those who have symptoms to see a doctor.

"These are people who may be suffering without knowing there is something that can help them."

### SIDEBAR:

#### WHAT TO EAT

Doctors usually suggest that patients with symptoms of irritable bowel syndrome modify their diets. Among the common suggestions:

Eat plenty of soluble fiber foods such as rice, pasta, potatoes and white bread.

Avoid dairy, fried foods, red meat, sodas, coffee and alcohol.

Eat small portions.

SOURCE: "IBS: An Essential Guide for the Newly Diagnosed" by Heather Van Vorous

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