

# Irritable Bowel Syndrome vs. Inflammatory Bowel Disease: *What are they? And what's the difference?*

They're often thought to mean the same thing, but Irritable Bowel Syndrome (IBS) and Inflammatory Bowel Disease (IBD) are very different things. Here, we walk you through the similarities and differences between IBS and IBD.

## Irritable Bowel Syndrome

### What is it?

- A 'functional' disorder of the gut that leads to uncomfortable gastrointestinal symptoms
- It affects around one third of the population
- Certain foods, lifestyle and stress can affect severity of symptoms, and symptoms can change overtime

### How to manage?

IBS can often be managed with dietary and lifestyle changes.

### What are the symptoms?

- Abdominal pain
- Wind
- Diarrhoea or constipation
- Bloating

### What role does food play?

Along with lifestyle interventions, food plays a large role in IBS management. Management is highly individualised and requires guidance from an Accredited Practising Dietitian. Some top line strategies a dietitian might suggest for someone with IBS include:

- More or less fibre, depending on current intake
- Eating small meals and snacks regularly throughout the day
- Cutting back on gassy foods like onion, beans and cauliflower
- Cutting back on creamy sauces and deep-fried food as they are high in fat
- Cutting back on artificial sweeteners
- Drinking less caffeine, soft drink and/or alcohol
- Drinking more water
- Trying a low-FODMAP diet (see overleaf)

# Inflammatory Bowel Disease

## What is it?

- A chronic, autoimmune condition that results in inflammation of the bowel
- Over 100,000 people in Australia suffer from IBD
- The disease has an ongoing pattern of flare ups and remission. Flare ups can be severe and require hospitalisation
- During remission, IBD does not interfere with day-to-day life
- There are two main types of IBD:
  1. Crohn's Disease, which can affect the full thickness of the wall of the digestive tract at any location along the digestive tract
  2. Ulcerative Colitis, which affects only the inner lining of the colon and rectum

## How to manage?

There is no cure for IBD, but it can be managed with medications and, if necessary, surgery.

## What are the symptoms?

- Abdominal pain
- Abdominal cramping
- Loss of appetite
- Weight loss
- Diarrhoea or constipation
- Lethargy
- Anaemia
- Nausea

## What role does food play?

There is no special diet for IBD. Eating a healthy, higher fibre diet is the best place to start to ensure your body has all the nutrition it needs for good health and to support the healing process. Some people find a low-FODMAP diet helpful, but you should discuss this with your dietitian.

During a flareup, lower fibre, bland diets may be useful.

An Accredited Practising Dietitian can support you in finding the best eating pattern for your IBD journey. They can also help to manage gut-related symptoms through food.

## What are FODMAPs and what is a low-FODMAP diet?

**FODMAPs are a type of carbohydrate that your body cannot fully digest, so end up fermenting in your large bowel. FODMAPs are found in a wide variety of foods, including fruits, vegetables, grains and legumes. Many people with IBS are intolerant to some level of FODMAPs.**

A low-FODMAP diet is a 'test' diet – not a forever diet. It is a 4-to-6 week method of identifying which FODMAPs cause discomfort in an individual. During this time, a strict low-FODMAP diet is followed and, if symptoms subside, the FODMAPs are systematically tested to identify which specific FODMAPs a person is intolerant to. After identifying problematic FODMAPs, the diet is liberalised so that many different foods can be enjoyed without any gut symptoms. This is a tricky process that should always be carried out under the guidance of an Accredited Practising Dietitian.