

A Randomized Clinical Trial of CBT App versus Active Control App for Irritable Bowel Syndrome



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BACKGROUND

- Irritable Bowel Syndrome (IBS) is a chronic GI disorder characterized by abdominal pain and altered bowel habits.
- Prevalence: ~10% of US population
- Psychiatric comorbidity with IBS: up to 90% in treatment seeking patients
- Impact on Quality of Life: physical and emotional burdens and disability
- Treatment of Choice: GI-specific Cognitive-Behavioral Therapy (CBT)
- Limited Access to Care because of...
 - Few GI-knowledgeable CBT therapists
 - Financial constraints

METHODS

- Participants recruited from a variety of online platforms (e.g., Facebook, Reddit, Quora)
- Participants were randomly allocated to Treatment (TX) or Active Control (AC) groups.
- TX group used the Zemyed 2.0 app for 8 weeks, while the AC group used an educational and relaxation training active control app.
- At 8 weeks, both groups completed follow-up surveys, and AC was crossed over to active treatment.
- Recruitment is still ongoing.

RESULTS

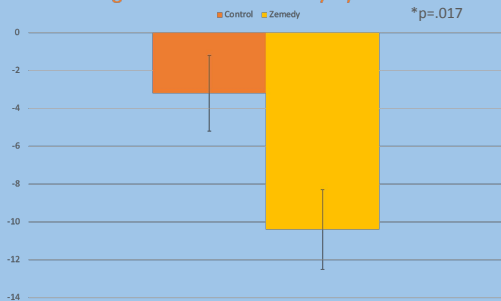
- Both the TX group and the AC group improved on the primary outcome measures of Health Related Quality of Life and GI symptom severity.
- The treatment group improved significantly more on overall IBS severity, catastrophizing, fear of food and anxiety about visceral sensations.

CONCLUSION

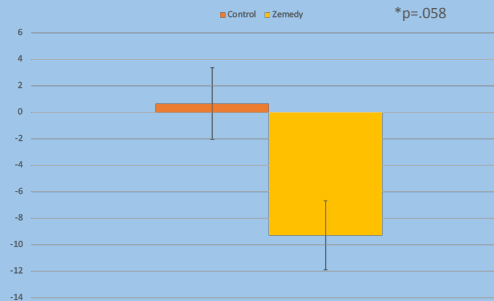
- Control app front-loaded two active components of treatment (education and relaxation).
- But Zemyed is changing the underlying core vulnerabilities in IBS.

A CBT Smartphone App for IBS Improves Visceral Anxiety and Fear of Food

Change in Visceral Sensitivity by Condition

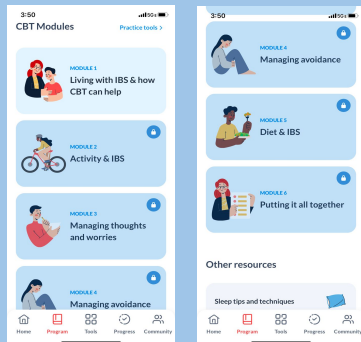


Change in Fear of Food by Condition



Among the outcome measures, the TX group reported a statistically significant improvement in the VSI and fear of food measures compared to the control group participants.

A snapshot of the Zemyed 2.0 app. Participants primarily work through the six modules containing CBT exercises and educational content.



Take a picture to download the protocol paper



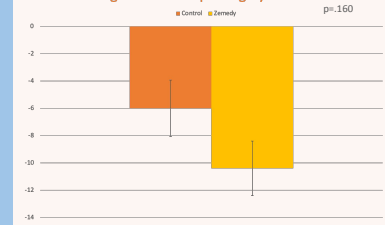
Change in HRQL by Condition



Change in GI Symptom Severity by Condition



Change in Catastrophizing by Condition



Change in Rome IV Severity by Condition

