## Therapists should assess for IBS during psychiatric intake

## Introduction

- Irritable Bowel Syndrome (IBS) is a disorder of gutbrain interaction that is commonly characterized by abdominal pain, bloating, and changes in a person's bowel habits.
- The prevalence of IBS in the general population is up to 6\% using Rome IV criteria. Of these people, up to $90 \%$ also have a comorbid psychiatric diagnosis.
- This study aims to find the inverse of the above: What is the prevalence of IBS in patients with mental disorders?


## Methods

- Participants ( $n=747$ ) were recruited from two sources:

Prolific, $n=698$
Reddit, $n=49$

- Participants had at least one of eight diagnoses.
- Participants completed a survey with the Rome IV diagnostic criteria, demographic information and psychiatric diagnosis.


## Prevalence of IBS in psychiatric populations



Additional Visuals

IBS Prevalence:
Rome III
IBS Prevalence: Rome IV


51\%


Conclusion

- Clinical IBS symptoms are significantly more prevalent in those with anxiety, depression, OCD, or PTSD, compared with the general population.
- IBS prevalence rates were far higher using Rome III diagnostic criteria.
- Therapists should scan for IBS symptoms at intake.


## Future Directions

- Investigate impacts of Rome IV updates on IBS "diagnostic orphans."
- Chart review studies of patients with confirmed DSM 5 and IBS diagnoses.
- Expand IBS training resources for therapists to address gastrointestinal distress.

