

produce less bloating and distention. Fiber should be started at a nominal dose and slowly titrated up as tolerated over the course of several weeks to a targeted dose of 20–30 g of total dietary and supplementary fiber per day. Even when used judiciously, fiber can exacerbate bloating, flatulence, constipation, and diarrhea. Patients with drug-induced or slow colonic transit constipation usually do not respond to fiber supplementation.

ANTISPASMODICS

Clinicians have observed that anticholinergic drugs may provide temporary relief for symptoms such as painful cramps related to intestinal spasm. Although controlled clinical trials have produced mixed results, evidence generally supports the beneficial effects of anticholinergic drugs for pain. Physiologic studies demonstrate that anticholinergic drugs inhibit the gastrocolic reflex; hence, postprandial pain is best managed by giving antispasmodics 30 min before meals so that effective blood levels are achieved shortly before the anticipated onset of pain. Most anticholinergics contain natural belladonna alkaloids, which may cause xerostomia, urinary hesitancy and retention, blurred vision, and drowsiness. They should be used in the elderly with caution. Some physicians prefer to use synthetic anticholinergics such as dicyclomine that have less effect on mucous membrane secretion and produce fewer undesirable side effects. Peppermint oil appears to reduce abdominal cramps by some undefined mechanism. In a meta-analysis of nine double-blind randomized controlled trials evaluating 726 IBS patients, peppermint oil was found to be significantly superior to placebo for global improvement of IBS symptoms and reduction in abdominal pain. The most commonly reported adverse event was heartburn, which was mild and transient.

ANTIDIARRHEAL AGENTS

Peripherally acting opiate-based agents are the initial therapy of choice for IBS-D. Physiologic studies demonstrate increases in segmenting colonic contractions, delays in fecal transit, increases in anal pressures, and reductions in rectal perception with these drugs. When diarrhea is severe, especially in the painless diarrhea