

The overlap in gastroesophageal reflux disorder and irritable bowel syndrome

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A research group in Iran investigated the prevalence of overlapping gastroesophageal reflux disorder (GERD) and irritable bowel syndrome(IBS) in patients referred to a gastroenterology clinic over a period of ten years. This finding suggests that GERD and IBS should be considered as parts of the same spectrum of diseases.

Gastroesophageal reflux disorder (GERD) and irritable bowel syndrome (IBS) are two very common disorders affecting the gastrointestinal tract. About 10% of the population experience daily discomfort from reflux of gastric contents into the esophagus. More than 10% of the population experience abdominal pain and disturbed bowel movement because of irritable bowel syndrome. Until recently, the dominant view in clinical practice was that GERD and IBS are two different diseases with no link. This view has been challenged by a body of increasing evidence showing that the prevalence of IBS like symptoms is very high in patients with GERD and vice versa. This finding inspired research and hypotheses regarding the link between these two diseases. Whether general hyperalgesia in the gastrointestinal tract or a general dysfunction in smooth muscle is responsible for this overlap is not clear.

A research article to be published on March 14, 2010 in the <u>World</u> <u>Journal of Gastroenterology</u> provides more evidence regarding the relationship between GERD and IBS. The research team led by Professor Malekzadeh and Dr.Nasseri-Moghaddam from Digestive disease research center, Shariati Hospital, Tehran University of Medical Sciences performed a retrospective study in a gastroenterology clinic



setting to investigate the prevalence of GERD in patients with a primary diagnosis of IBS and vice versa. They also measured the prevalence of other functional symptoms of the <u>gastrointestinal tract</u> in patients with GERD, IBS or both. They recruited 6 476 patients presenting to the GI clinic with symptoms of functional dysfunction of the GI tract.

This data is from a very large number of patients, probably the largest data set that has been reported about the overlap between IBS and GERD in the literature. It also shows that not only is GERD more common among patients with IBS, or IBS is more common in patients with GERD, but also other functional symptoms such as nausea and changes in bowel movement or even extra gastrointestinal symptoms such as headache are more prevalent in patients who present with overlapping GERD and IBS. This is more evidence that some systemic component underlies the pathophysiology of both of these disorders; the more severe the disorder the more the chance of having multiple symptoms and suffering from both GERD and IBS.

More information: Yarandi SS, Nasseri-Moghaddam S, Mostajabi P, Malekzadeh R. Overlapping gastroesophageal reflux disease and irritable bowel syndrome: Increased dysfunctional symptoms. World J Gastroenterol 2010; 16(10): 1232-1238 www.wjgnet.com/1007-9327/full/v16/i10/1232.htm

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