Intestinal infection and irritable bowel syndrome.

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The observation that the symptoms of irritable bowel syndrome (IBS) in some patients might follow an episode of acute gastroenteritis came from epidemiological studies. Both retrospective and prospective studies suggest that between 4% and 26% of patients develop IBS for the first time after gastroenteritis. The diagnosis of post-infectious IBS is typically made from the history. In addition, as with the diagnosis of IBS more generally, it is important to exclude other clinical causes for persistent bowel dysfunction. There is little, if any, evidence to support the widely-held view that patients with post-infectious IBS carry a better prognosis than IBS patients more generally. The management of patients with post-infectious IBS is the standard approach that might be applied to all patients with IBS. Post-infectious IBS patients may differ from IBS patients in general in having a low-level of intestinal inflammation. Work in animal models, and detection of low-grade inflammation in intestinal biopsies combined with markers of intestinal inflammation such as faecal calprotectin all indicate a strong possibility that persisting inflammation after the acute infection may be important in the pathogenesis of post-infectious IBS.

PMID: 15647632