

IBS: What Your Brain Has to Do with It

Behavioral medicine can help

By [Judith Scheman, PhD, Cleveland Clinic Expert](#)

[SHORT DESCRIPTION] Behavioral medicine techniques may help ease irritable bowel syndrome (IBS), especially if your symptoms aren't responding to other medical treatments.

Irritable bowel syndrome (IBS) can irritate more than your gut. Sometimes having persistent abdominal pain, gas, diarrhea or constipation can make you feel annoyed, angry, depressed or anxious. And in return, all of those negative emotions can worsen your IBS symptoms.

It seems like a vicious cycle. But there's good news: The opposite is also true. Good emotional health can help ease your IBS symptoms, which can set you, your brain and your gut on course to feel even better.

How your brain and belly communicate

Your brain and spinal cord are your body's central nervous system. Nerves, neurons (nerve cells) and neurotransmitters (chemicals that help nerve signals flow from one neuron to another) run from your brain throughout your body. Those that run along your digestive tract — from your esophagus, through your stomach and intestines, to your anus — are called the enteric nervous system.

Your brain and belly talk to each other through this network of nerves. And they respond to the same neurotransmitters. That explains why emotional distress can cause digestive distress and vice versa.

For example, when you sense danger, your central nervous system triggers a "fight or flight" response, a gush of hormones and neurotransmitters. When word reaches your enteric nervous system, your gut slows down or stops digestion so your body can use that energy to combat the danger. The result can be abdominal pain or other gastrointestinal (GI) problems.

Stressing out about other things, like public speaking or a personal confrontation, also can slow your digestive system and cause discomfort. And when you're feeling excited or nervous, your stomach can empathize with "butterflies."

Sometimes stress can contribute to diarrhea. Persistent stress is associated with inflammation and a less-than-optimally-functioning immune system.

In other words, the relationship between your brain and digestive system is quite complex.

Behavioral medicine approaches can help IBS

Because of this brain-gut connection, it stands to reason that IBS and other digestive disorders can be treated with GI *and* behavioral medicine approaches. Sometimes it takes *both* to minimize the discomfort or at least help you cope with persisting symptoms.

Behavioral medicine treatments for IBS include:

Relaxation therapy. Progressive muscle relaxation and guided imagery can help reduce your body's reaction to stress. This training can help calm your body and mind, and help you sleep better, which also promotes healing. Deep relaxation causes your brain to release endorphins, your body's natural painkiller.

Cognitive behavioral therapy. Changing how you think and behave can improve your body's response to stress, including the stress of IBS. You learn coping skills, such as focusing on positive emotions, physical activity and finding joy. Change your thoughts, change your brain, change your gut!

Biofeedback. This technique allows you to get feedback about a physiological function, such as your temperature or heart rate, and then helps you control it. With biofeedback, you can slow your heart rate or warm your hands when you're stressed.

Another example: Patients with constipation or stool leakage can use a device that measures the strength of their pelvic floor muscles. By watching the device's measurements on a computer screen, patients learn how to relax or contract muscles to overcome their GI issues. Usually this particular type of biofeedback is done with a physical therapist, not a psychologist.

When to seek help from a behavioral medicine specialist

Patients often report improved mood and better quality of life after they've had behavioral medicine treatments. And many ultimately have fewer medical visits for their IBS.

You may benefit from a behavioral medicine approach if:

- Medication or other GI treatments aren't controlling your IBS
- You notice that stress makes your symptoms worse
- You prefer not to use medication for your symptoms

Behavioral medicine therapy is not for you if you have other major psychiatric issues not related to your GI condition, such as an active eating disorder, schizophrenia or suicidal thoughts.

Behavioral medicine treatments provided by a health psychologist often can be billed to medical insurance. Ask your insurance provider.

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