

ASK THE EXPERT

Question: Why see a psychologist when the diagnosis is IBS?

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Many people experience distress and anxiety when their doctor makes a recommendation that they see a psychologist. This reaction often comes from the belief that a referral to a psychologist carries with it assumptions about symptoms being “all in your head” or the result of “mental illness”. These are two of the biggest misconceptions about the practice of psychology in a medical setting, and they can often stand in the way of patients achieving a meaningful reduction in symptoms. In this column, I hope to dispel some of these misconceptions around psychology in a medical setting, and in doing so communicate a few of the benefits you might be able to achieve in working with a psychologist to address your symptoms of IBS.

First things first, your physical problems are real! If your doctor gives you a recommendation to meet with a psychologist it does not mean that the symptoms are “all in your head” or the result of “mental illness.” Your experience of IBS is likely to be debilitating to you, and it can have wide ranging effects on your loved ones, yourself and activities that you want to engage in. Psychologists and physicians work together, with the understanding that the mind and body are connected. If you are feeling ill and having many symptoms of IBS, you may also experience an increased level of stress and discomfort. This stress and discomfort contribute to a cycle of worsening symptoms that can spiral into more severe IBS. Psychologists and physicians work together with you to interrupt that cycle and help you learn to decrease the number and severity of your symptoms. Psychologists that work in medical settings often specialize in a field of psychology known as “Behavioral Medicine”. This specialization focuses on thoughts, feelings and behaviors that get in the way of effective coping with biomedical symptoms, and also focuses on teaching you and those around you good self-care behaviors. One question you might be asked when you come into our office is “What steps are you taking to take care of yourself?” Increasing the number of good self-care behaviors that you are implementing is often a great place to start in addressing your symptoms.

Sometimes patients with IBS are dealing with a heavy burden of past life stresses and circumstances. While talking about these events can occasionally be beneficial, it does not need to be the focus of therapy for you to see progress. Often, learning to implement good sleep, hygiene, stress reduction, and other coping strategies for dealing with situations can go a long way in making you feel more in control of your symptoms, rather than feeling like IBS is controlling you. Increasing your control over symptoms is another one of the steps towards improvement in your IBS. Often, people experience distress related to problems and difficulties that arise around their IBS symptoms rather than from the IBS symptoms themselves. For example, occasionally patients with IBS get anxious when leaving the house or any “known” environment because of a fear of becoming



incontinent. Over time, this fear grows and fewer places and activities are deemed “safe”, resulting in a withdrawal from previously enjoyed activities. This fear or “anticipatory anxiety” is part of a vicious cycle that can actually make your symptoms worsen or even contribute to an episode of incontinence. Through discussion and individually developed behavioral exercises, a psychologist can help you reduce these fears and re-engage in activities that you have wanted to engage in, thereby helping you break the vicious cycle of your symptoms.

Psychologists also work with you to examine behaviors, thoughts and feelings that are getting in the way of effective coping with your IBS symptoms. Just like physicians, our ultimate goal as psychologists is to make ourselves unnecessary. We do this by helping you develop your own skills that can allow you to handle challenging situations more effectively by yourself. If you are living with a medical diagnosis, chances are that you are already getting a lot of “advice” from everyone around you. In all likelihood, a psychologist will not give you “advice”; instead, he or she will work with you to develop your own plan for addressing the symptoms that are bothering you. Treatment plans and directions are established collaboratively with the overall goal of helping you see your symptom picture improve.

So how does psychology work? There is no magic. IBS is a diagnosis that involves sensitization of nerve endings in the GI tract. This sensitization can occur from a number of different sources (infection, inflammation, significant stress, or chronic activation of the autonomic nervous system). This sensitization has the effect of turning up the volume on your symptoms. One way that psychologists can work with you is to teach you ways of slowing down your autonomic nervous system, using tools of progressive muscle relaxation, guided imagery, focused concentration, or even biofeedback. Essentially, learning and practicing these behaviors has the effect of turning down the volume on your symptoms, and it can go a long way to giving you increasing numbers of low symptom days. IBS is a chronic condition. There is no magical pill that will take away your symptoms or turn back the clock to the time “before this all started.” Because of this, the ultimate focus of treatment with a psychologist is minimizing the debilitation and discomfort you feel as a result of your symptoms. Just because a disease process is chronic or longstanding does not mean you have to suffer with it. Working with a psychologist is one way to access a range of new tools for living with your IBS.

In conclusion, IBS is multi-determined and can benefit from being addressed using a multi-disciplinary treatment approach. Working with a psychologist is just one part of that treatment approach, and it has been shown to be an effective addition to traditional biomedical treatment. Using a combination of the tools and plans discussed in this column, patients can see a significant reduction in their symptoms. Please feel free to contact me if you have any questions about seeing a psychologist when the diagnosis is IBS – stephan_weinland@med.unc.edu.