Title: Implementing Standardised Dietetic Care Plans for Irritable Bowel Syndrome. A Regional Service Evaluation.

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HSE West and North West

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Introduction

Irritable bowel syndrome (IBS) is a chronic, relapsing and often life-long disorder with prevalence in adults of 7–21% globally. It is characterised by the presence of abdominal pain/discomfort, which may be associated with defaecation and/or accompanied by a change in bowel habit Symptoms may include disordered defaecation (constipation or diarrhoea or both) and abdominal distension, usually referred to as bloating (NICE 2017).Dietary triggers are common, with up to nine out of ten individuals reporting that food generates symptoms. Diet and Lifestyle advice are recommended as first line treatment for IBS. A low FODMAP diet is recommended as second-line treatment for IBS.

Methods

The Department of Nutrition and Dietetics Sligo, Leitrim and Donegal identified service delivery gaps for the management of IBS, including the use of varying approaches for symptom assessment and evaluation. As well as this, we identified costly approaches in outsourcing patient resources. We used a cross-functional approach to co-design and implement IBS care plans and patient resources. The use of Functional Gut Disorder (FGD) Symptom Evaluation Tool was standardised at initial and follow-up assessments. A pilot sample of patients attending Sligo Primary Care, who completed treatment Jan 2024- October 2025 were used to measure patient outcomes. (n=22)

Results

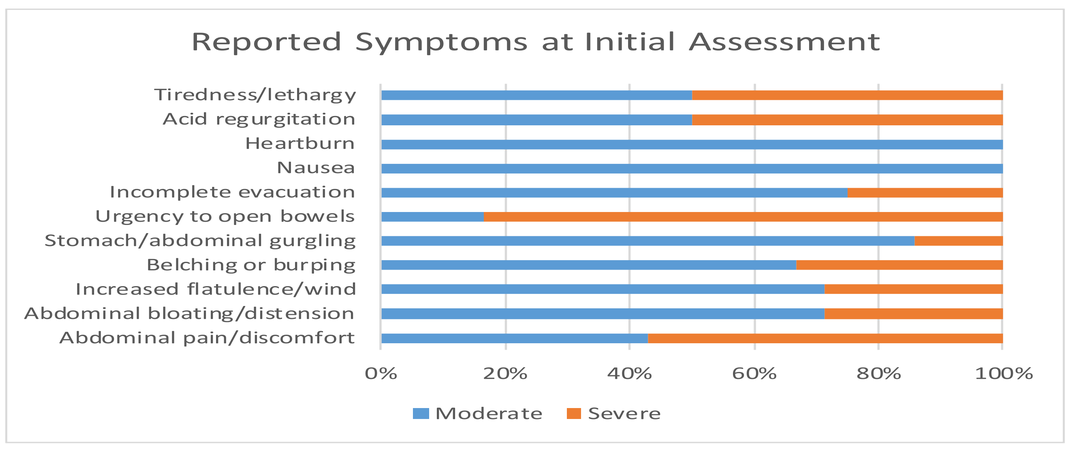
Overall Dietitian Intervention: 43% reported IBS symptoms improved with 1ST Line Advice, 64% required further 2nd line treatment (Low FODMAP) , 14% were unsuccessful- did not attend/required follow up with GP/Psychological input

Reported Symptoms at Initial Assessment with Dietitian: Only 15% of patients reported satisfactory relief of gut symptoms at initial assessment.

50% reported overall symptoms as severe.

Patients were asked to rate 11 specific symptoms. 71% rated urgency to open bowels as severe, 57% reported abdominal pain and discomfort as severe.71% reported moderate symptoms of abdominal bloating and increased flatulence. 85% reported moderate symptoms of abdominal gurgling.

Graph 1: Reported Symptoms at Initial Assessment:



Reported Symptoms Post Dietitian Intervention: 100% of patients reported satisfactory relief of symptoms following 1st Line Treatment. 83% reported satisfactory relief of symptoms following 2nd Line treatment.

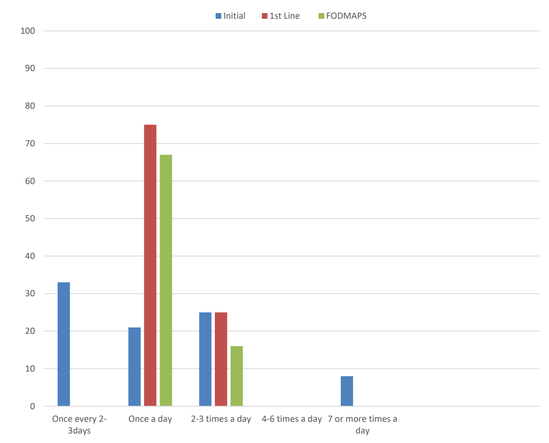
Stool Frequency: At initial assessment 33% of patients reported having a bowel motion every 2-3 days, with 8 % reporting having to open bowels more than 7 times per day.

Following Dietitian Intervention, those who reported once daily bowel motions increased from 21% at initial assessment to 75% with 1st Line treatment and 67% with 2nd Line Treatment.

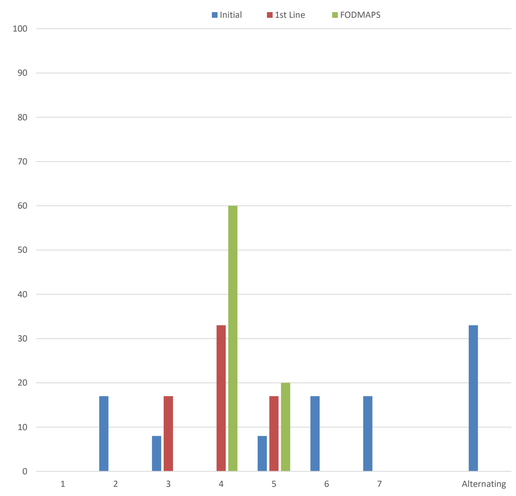
Stool Type:

At initial Assessment 17% reported Type 2 Bowel Motion, 17% reported Type 6, 17% Type 7. 33% reported alternating between constipation and diarrhoea. Following 2nd Line Treatment 80% of patients reported Type 4/5 Bowel motion.

Graph 2: Stool Frequency:



Graph 3: Stool Type:



Cost Savings: Developing Low FODMAP Patient Resources lead to department cost savings. Previously, Low FODMAP Patient booklets were regularly ordered externally, which lead to delivery cost for each order along with the cost of booklets for each stage of the Low FODMAP Diet.

Conclusion

- IBS Care Plan development enabled a structured and streamlined approach to service delivery with positive patient outcomes.
- Developing Low FODMAP Patient Resources locally lead to cost savings within the Department of Nutrition and Dietetics.

References

National Institute for Health and Clinical Excellence. Clinical guideline [CG61] Published: 23 February 2008 Last updated: 04 April 2017. Irritable bowel syndrome in adults: diagnosis and management.

McKenzie, Y.A., Bowyer, R.K., Leach, H., Gulia, P., Horobin, J., O'Sullivan, N.A., Pettitt, C., Reeves, L.B., Seamark, L., Williams, M., Thompson, J., Lomer, M.C.E., (2016). British Dietetic Association systematic review and evidence-based practice guidelines for the dietary management of irritable bowel syndrome, *Journal of Human Nutrition and Dietetics*,