Irritable bowel syndrome: an epidemiological study from the west of Iran

Irritable bowel syndrome (IBS) is defined as abdominal pain or discomfort associated with disturbed defecation. It is a common reason for referral to a gastroenterologist, and for absenteeism. We studied the prevalence of IBS among medical and other health-related students in Lorestan University of Medical Sciences in western Iran.

During 2002, randomly selected students in medicine, nursing and health faculties of the University were administered a symptom questionnaire. The diagnosis of IBS was based on the Rome II criteria and absence of alarm symptoms. Blood counts, ESR and stool examination were performed in those with positive symptom criteria. Laboratory testing for thyroid function was not performed. The study was approved by the Ethics Committee of the University. Data were analyzed using SPSS for Windows (ver. 12.1); chi-square test and multivariate analysis were used for intergroup comparisons.

Of the 1200 students in the University, 650 were selected; 618 of them (age range 18-30 years [mean 22, SD 3]; 195 [32%] male) returned the questionnaire. 128 (21%) had symptoms suggestive of IBS, and 114 (18.4%) had a final diagnosis of IBS after laboratory tests. All 114 complained of abdominal pain or discomfort; constipation, diarrhea, and alternating diarrhea-constipation were reported by 57 (50%), 33 (29%), and 24 (21%) students, respectively. The frequency of IBS was similar among male (44/195) and female (70/423) students, and was not related to duration of study in the University (Table). It was similar among surgery technician (46/182), midwifery technician (38/157), nursing (24/113) and medical (34/166) students.

The reported prevalence of IBS in Western countries is approximately 10% (3% to 25%). The epidemiology of IBS outside the Western world is poorly characterized. Two recent studies from our region, one from the Shahrekord community according to the Rome II criteria and the second on pastoral nomads and industrial laborers, reported the prevalence of
Dysphagia due to transmural migration of polypropylene mesh into esophagus nine years after Nissen fundoplication. Endosc revealed a folded polypropylene mesh lying at 30 cm. The surrounding mucosa was inflamed. There was no evidence of stricture. After endoscopic retrieval of the mesh the patient became asymptomatic.

Six years later the patient presented with dysphagia. Three weeks after this procedure, a foreign body was identified in the lower part of the esophagus. Endoscopy revealed a foreign body in the lower part of the esophagus. Polypropylene does not appear to be a good suture material and has not been validated in Iran. The prevalence of IBS in our cases was higher than in these studies, and nearer to figures from Western countries. This may be related to our population being more educated. It must be noted that the Rome II criteria have not been validated in Iran.

Koorosh Ghannadi,** Ramin Emami,# Mohammad Bashashati,* Mohammad-Javad Tarrahi,** Shahrokh Attarian**

Departments of *Internal Medicine and **Epidemiology and Biostatistics, Lorestan University of Medical Sciences, Lorestan; #Department of Gastroenterology, Imam Khomeini Hospital, Tehran University of Medical Sciences, Tehran; ##Shariati Hospital, Tehran University of Medical Sciences, Tehran, Iran

References

Correspondence to: Dr Ghannadi. E-mail: bashashati_md@yahoo.com