

Holistic Approach May Benefit Irritable Bowel

BY MARY ELLEN SCHNEIDER
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RENO, NEV. — The treatment of irritable bowel syndrome could benefit from a more holistic approach including comprehensive dietary changes, nutritional supplements, exercise and relaxation therapy, and acupuncture, Dr. Joel S. Edman said at the annual meeting of the American College of Nutrition.

Conventional treatments for irritable

bowel syndrome (IBS) center on patient education, avoiding common food triggers, and increasing fiber intake, said Dr. Edman, a clinical nutritionist at the Myrna Brind Center of Integrative Medicine at the Thomas Jefferson University in Philadelphia. Dr. Edman has received grant support from Integrative Therapeutics Inc., a nutritional supplement manufacturer.

Instead, an integrative approach to treating IBS should involve some of the same dietary changes but also should include an

elimination diet or rotation diet, and more use of nutritional supplements. It also may include exercise, massage, acupuncture, and stress management techniques.

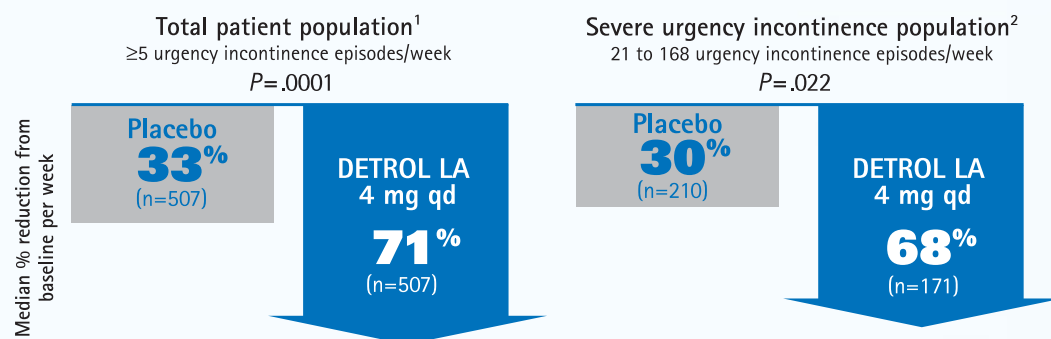
Dr. Erdman favors a food intolerance or elimination challenge diet. This diet first calls for avoiding sugar, dairy, wheat, alcohol, and caffeine for 1-2 weeks and adding a new food every 2-3 days. Most IBS patients will improve on this diet, he said. For patients who have longstanding IBS and already may have tried dietary approaches,

the next foods to avoid include soy, peanuts, corn, citrus, and other gluten grains.

Other tips include not overeating, and eating smaller and more frequent meals. He also suggested eating cooked rather than raw vegetables.

Timing also is important. Patients shouldn't begin an elimination challenge diet until they start taking nutritional supplements and begin relaxation techniques, since the diet often is an added source of stress, he said. ■

DETROL LA is the #1 prescribed brand for OAB*— with **BIG REDUCTIONS** in OAB symptoms^{1,2}



Van Kerrebroeck et al. *Urology*. 2001;57:414-421.¹
A 12-week, placebo-controlled OAB study.
See full study description on next page.

Landis et al. *J Urol*. 2004;171:752-756.²
A post hoc subgroup analysis of Van Kerrebroeck et al.
See full study description on next page.

DETROL LA is indicated for the treatment of overactive bladder with symptoms of urge incontinence, urgency, and frequency. DETROL LA is contraindicated in patients with urinary retention, gastric retention, or uncontrolled narrow-angle glaucoma and in patients who have demonstrated hypersensitivity to the drug or its ingredients. DETROL LA capsules should be used with caution in patients with clinically significant bladder outflow obstruction, gastrointestinal obstructive disorders, controlled narrow-angle glaucoma, and significantly reduced hepatic or renal function. Dry mouth was the most frequently reported adverse event (DETROL LA 23% vs placebo 8%); others (≥4%) included headache (DETROL LA 6% vs placebo 4%), constipation (DETROL LA 6% vs placebo 4%), and abdominal pain (DETROL LA 4% vs placebo 2%).

*Source: IMS NPA, based on total US prescriptions of antimuscarinics for OAB from October 2001 to December 2005.

†Source: IMS Midas Global Sales Audit, Verispan longitudinal data, based on total prescriptions of DETROL and DETROL LA for OAB from April 1998 to December 2005.

74 million
prescriptions[†]



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