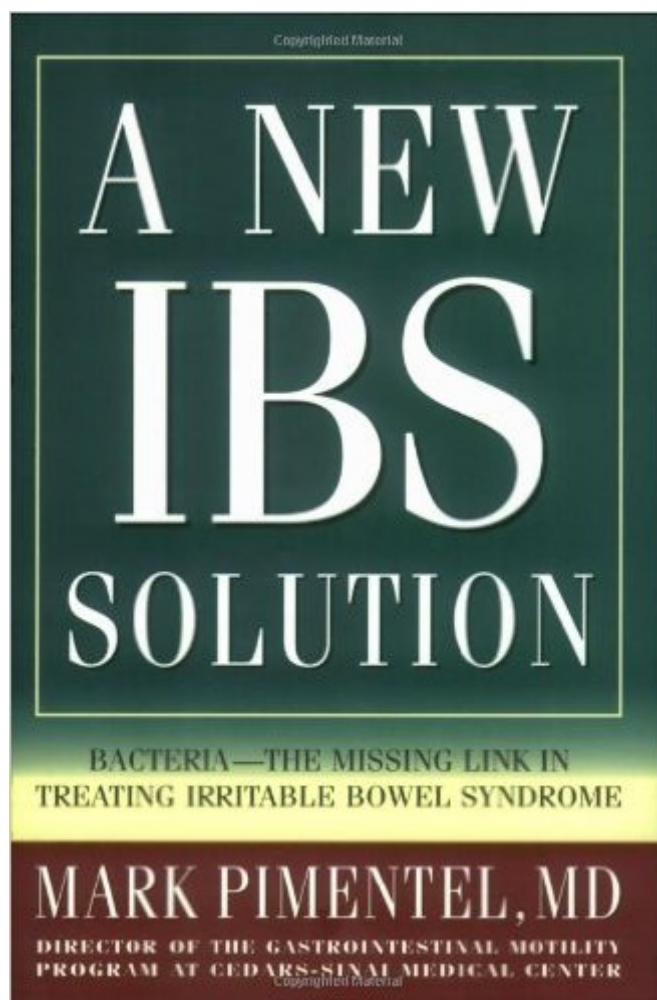


The book was found

A New IBS Solution: Bacteria-The Missing Link In Treating Irritable Bowel Syndrome



Synopsis

A New IBS Solution offers a revolutionary look at the way Irritable Bowel Syndrome is currently being treated. Today, over 60 million people of all ages across the country are suffering from Irritable Bowel Syndrom(IBS), which is characterized by abdominal pain, bloating, and altered bowel habits. But because patients may find it difficult to discuss their bowel problems with their physicians, they often suffer in silence or even worse, "learn to live it". According to Dr. Mark Pimentel, Director of the Gastrointestinal Motility Program at Cedars-Sinai Medical Center, the majority of IBS cases can be treated successfully. Dr. Pimentel believes that the "missing link" or root cause of most IBS symptoms can be attributed to an overgrowth of bacteria in the small intestine. A New IBS Solution takes you through the historical evolution of conventional medicine's view on IBS in a way that can be easily understood. In addition, Dr. Pimentel presents a simple treatment protocol that will not only help you resolve your IBS symptoms, but will also prevent their recurrence.

Book Information

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Customer Reviews

This book may help answer many of your IBS problems. Easy read for millions of individuals suffering from gas, bloating, and additional disruptive IBS symptoms. The book provides excellent information for patients and doctors alike. Dr. Pimentel, Director of the GI Motility Program at well respected Cedars-Sinai Medical Center in LA, discusses a new approach to treating IBS patients, with 10 day course of the non-systemic antibiotic XIFAXAN. He uses this new antibiotic in combination with low dose zelnorm maintenance therapy, dietary modifications, etc.XIFAXAN has

helped give myself and some of my family members who also suffer from IBS, hope that there is an answer to our suffering. This might be the best Christmas present of all! :^) After reading Dr. Pimentel's book I actually researched to see what else was out on this subject and found this July article from the St. Louis Post Dispatch: Controversial Theory Links Bacterial Overgrowth to Irritable Bowel Syndrome By Kay Quinn Healthbeat Reporter It causes everything from pneumonia and infections, to certain stomach ulcers. Now, bacteria could be to blame for triggering a common intestinal ailment. This new theory has led to a new treatment for irritable bowel syndrome or IBS. For years, doctors chalked up the alternating symptoms of constipation and diarrhea to stress. But a developing theory links bacteria that causes food poisoning, including salmonella, to IBS. 37 year old Jennifer Freese has been battling the pain and discomfort of IBS since she was 19. "Things you want to do you don't always do because you don't know when it will flare up.

"A New IBS Solution" was written in 2006 by Dr. Mark Pimentel, at the time Director of the Gastrointestinal Motility Program at Cedars-Sinai Medical Center, to explain his understanding that many cases of irritable bowel syndrome (IBS) are caused by small intestinal bacterial overgrowth (SIBO) and his protocol for successfully treating the condition. He begins by taking the reader through the history of theories and treatment for IBS, which is currently the most common chronic medical condition in the United States. Dr. Pimentel explains the sometimes-confusing labeling and categorization of IBS, why IBS has so often been attributed to psychological causes, comments on drugs that have been used to treat symptoms, what is known about post-infectious IBS (food poisoning), which seems to constitute 20-30% of cases, before he concludes with an exposition of how and why he and his colleagues came to believe that IBS is caused by SIBO in many cases. Then Dr. Pimentel presents his treatment plan, described clearly and in enough detail that both laypeople and physicians can understand and follow it. The Cedars-Sinai Program for Treating IBS is essentially this: Several screening tests are recommended, among them a hydrogen breath test for SIBO. If a patient tests positive, he or she is given a 10-day course of the antibiotics Xifaxan and neomycin. If, after that, the patient is still positive for SIBO, a second course of antibiotics is given. The patient is to follow a low-carbohydrate diet in order to help the antibiotics along by starving the pathogenic bacteria. The diet restricts carbs that are absorbed low in the intestines while allowing some carbs - monosaccharides, starches, white wheat bread and pasta- that are absorbed high in the intestines.

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