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Summary

PREVALENCE AND BURDEN OF OPIOIDS USE IN PATIENTS WITH ROME IV CONSTIPATION-PRAEDOMINANT IRRITABLE BOWEL SYNDROME: A REAL-WORLD EXPERIENCE

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In a UK tertiary care clinic, 27% of IBS-C patients were taking opioids at first consultation, and opioid discontinuation led to symptom improvement in 55% of those who stopped without further intervention.

KEY POINTS

- Among 157 Rome IV IBS-C patients seen between 2016 and 2021, 70 (27.2%) were on opioids at their first outpatient visit.
- Opioid users had a more complex clinical profile than non-users: higher median age (49.0 vs 43.0 years), more comorbidities (median 2.0 vs 1.0), more prior surgeries, more hospital admissions, and significantly more concomitant medications (median 6.0 vs 2.0).
- Of 58 patients advised to discontinue opioids, 22 (31.4%) actually stopped; among these, 12 (54.5%) reported improvement in IBS-C symptoms (constipation, abdominal pain, or both) without additional treatment.
- The findings support the guideline recommendation against opioid use in gut-brain interaction disorders and may inform clinical decision-making for gastroenterologists managing IBS-C patients on chronic opioids.

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