

# PHARMACOLOGIC TREATMENTS FOR IRRITABLE BOWEL SYNDROME WITH DIARRHEA (IBS-D)<sup>1</sup>

Class	Medication	Use/Indication	ACG 2021 Guideline Recommendations
<b>PRESCRIPTION (RX) MEDICATIONS FOR IBS-D</b>			
<b>Non-absorbable antibiotics</b>	rifaxamin	IBS-D in adults	Recommended (strong/moderate evidence)
<b>Mixed opioid agonist/antagonist</b>	eluxadoline	IBS-D in adults	Suggested (conditional/moderate evidence)
<b>5-HT<sub>3</sub> agonist</b>	alosetron	Severe IBS-D in women who do not respond to conventional therapy	Recommended in women with severe symptoms who failed other therapies (conditional/low evidence)
<b>PRESCRIPTION (RX) MEDICATIONS FOR IBS</b>			
<b>Neuromodulators</b>	tricyclic antidepressants (desipramine, amitriptyline, etc.)	Not approved for IBS	Recommended (strong/moderate evidence)
	SSRIs, SNRIs	Not approved for IBS	N/A
<b>Antispasmodics</b>	dicyclomine	IBS in adults	Not recommended (conditional/low evidence)
	hyoscyamine	Not approved for IBS	
<b>OVER-THE-COUNTER (OTC) PRODUCTS</b>			
<b>Herbal remedy</b>	peppermint	Not approved for IBS	Suggested (conditional/low evidence)
<b>Opioid agonist</b>	loperamide	Not approved for IBS	Not recommended as first line
<b>Probiotics</b>	<i>Lactobacillus spp.</i> , <i>Bifidobacterium spp.</i> , etc.	Not approved for IBS	Not suggested (conditional/very low evidence)

## QUALITY OF EVIDENCE is expressed as<sup>2</sup>

- **High:** Estimate of effect is unlikely to change with new data
- **Moderate:** Likely to have an important impact on our confidence in the estimate of effect and may change the estimate
- **Low:** Likely to have an important impact on our confidence in the estimate of effect and may change the estimate
- **Very low:** Any estimate of effect is very uncertain

## STRENGTH OF RECOMMENDATION is classified as<sup>1</sup>

- **Strong:** Most patients should receive the recommended course of action
- **Conditional:** Many patients will have this recommended course of action, but different choices may be appropriate for some patients

Clinical Practice Guidelines were published in 2021 by the American College of Gastroenterology (ACG). The recommendations were based on the GRADE methodology. This information is provided as a reference tool only and is not a substitute for clinical judgment. Each healthcare provider is solely responsible for any decisions made or actions taken in reliance of this information.