

IBS Pain Discussion Guide

Use this guide to turn "my IBS pain is bad" into a more useful clinical conversation.

Describe The Pattern

1. Where is the pain?
2. Is it tied to bowel movements, meals, gas, stress, sleep, or anticipation?
3. Does pain stay high even when stool pattern improves?
4. Does pain feel new, severe, progressive, or different?

Ask About Routes

If this is loudest	Ask about
Pain volume	Visceral hypersensitivity and gut-brain treatment options
Urgency or diarrhea	IBS-D and serotonin-related routes
Constipation	IBS-C treatment and pelvic floor screening if relevant
Upper-GI fullness or burning	Functional dyspepsia or reflux evaluation
Red flags	Medical evaluation before self-experimenting

Keep Separate

- A mechanism explanation is not a diagnosis.
- A normal test does not mean pain is imaginary.
- A pain-amplification pattern does not make red flags safe to ignore.