

Importance of Rectal Urgency in Childhood Irritable Bowel Syndrome

TO THE EDITOR: We read with interest the article titled “The incidence of irritable bowel syndrome in children using the Rome III criteria and the effect of trimebutine treatment” by Karabulut et al¹ that is a rare and a valuable study from our country.

As the author stated, functional dyspepsia and urgency are very common symptoms in irritable bowel syndrome (IBS) patients. Although the association with the functional dyspepsia is known there is limited study regarding the frequency of rectal urgency in literature and we consider this knowledge to be of importance. In adult studies it was reported that rectal urgency is common especially in diarrheal type of IBS, although it is not included in the Rome III criteria. Cheng et al² in their study indicated 83% association between rectal urgency and IBS in only 6 cases. Karabulut et al¹ reported frequency of rectal urgency as 66.7% in children. That shows rectal urgency is an important symptom in childhood IBS and shed light on new studies about its utility as a diagnostic criteria.

It was also shown that colonic motility is related with opioid receptors in colon by pathophysiologic studies. Another important point from the study is the successful result with the trimebutine maleate that is effective on opioid receptors. Current treatments are not effective enough against IBS symptoms and new treatment modalities are necessary. Trimebutin maleate, one of the treatment options, shows enkephalin like effect and binds to intestine smooth muscle μ and δ receptors. It is stimulatory in case of hypomotility states and inhibitory in case of hypermotility states.³ Although the success rate is approximately 50% in adults, it is important to note that it was more than 90% in children population in terms of pain and abdominal discomfort. It suggests that opioid receptors have an important role in the pathogenesis of childhood IBS. In a recent study, it was shown that urgency symptoms improved markedly with Eluxadoline that exerts its ef-

fects by opioid receptors.⁴ However, recovery of the IBS symptoms was evaluated according to the last week’s pain and abdominal discomfort. Therefore, it is yet a question whether the drug has a long-term effect or not.

Last but not least, IBS and related syndromes (chronic pain syndrome, fibromyalgia and chronic pelvic pain syndrome) can affect the quality of life and cause decline in school performance in children. Even though the primary aim of this study is not to evaluate quality of life, successful treatment of pain and abdominal discomfort symptoms with trimebutine maleate will support the healthy psychosocial development and quality of life in children.

Naci Topaloğlu,¹ Erdem Akbal² and Şule Yıldırım¹

Departments of ¹Pediatrics and ²Gastroenterology, Medical Faculty, Çanakkale Onsekiz Mart University, Çanakkale, Turkey

1. Karabulut GS, Beşer OF, Erginöz E, Kutlu T, Cokuğraş FÇ, Erkan T. The incidence of irritable bowel syndrome in children using the Rome III criteria and the effect of trimebutine treatment. *J Neurogastroenterol Motil* 2013;19:90-93.
2. Cheng XF, Tan J, Tan KL. [Clinical analysis of six cases with juvenile primary fibromyalgia syndrome.] *Zhonghua Er Ke Za Zhi* 2005;43:863-865. [Chinese]
3. Delvaux M, Wingate D. Trimebutine: mechanism of action, effects on gastrointestinal function and clinical results. *J Int Med Res* 1997; 25:225-246.
4. Dove LS, Lembo A, Randall CW, et al. Eluxadoline benefits patients with irritable bowel syndrome with diarrhea in a phase 2 study. *Gastroenterology* 2013;145:329-338, e1.

Conflicts of interest: None.