

## IBS Module

<p>1. In the last 3 months, how often did you have discomfort or pain anywhere in your abdomen?</p>	<p>⓪ Never →          ① Less than one day a month          ② One day a month          ③ Two to three days a month          ④ One day a week          ⑤ More than one day a week          ⑥ Every day</p>	<p><i>Skip remaining questions</i></p>
<p>2. For women: Did this discomfort or pain occur only during your menstrual bleeding and not at other times?</p>	<p>⓪ No          ① Yes          ② Does not apply because I have had the change in life (menopause) or I am a male</p>	
<p>3. Have you had this discomfort or pain 6 months or longer?</p>	<p>⓪ No          ① Yes</p>	
<p>4. How often did this discomfort or pain get better or stop after you had a bowel movement?</p>	<p>⓪ Never or rarely          ① Sometimes          ② Often          ③ Most of the time          ④ Always</p>	
<p>5. When this discomfort or pain started, did you have more frequent bowel movements?</p>	<p>⓪ Never or rarely          ① Sometimes          ② Often          ③ Most of the time          ④ Always</p>	
<p>6. When this discomfort or pain started, did you have less frequent bowel movements?</p>	<p>⓪ Never or rarely          ① Sometimes          ② Often          ③ Most of the time          ④ Always</p>	
<p>7. When this discomfort or pain started, were your stools (bowel movements) looser?</p>	<p>⓪ Never or rarely          ① Sometimes          ② Often          ③ Most of the time          ④ Always</p>	
<p>8. When this discomfort or pain started, how often did you have harder stools?</p>	<p>⓪ Never or rarely          ① Sometimes          ② Often          ③ Most of the time          ④ Always</p>	
<p>9. In the last 3 months, how often did you have hard or lumpy stools?</p>	<p>⓪ Never or rarely          ① Sometimes          ② Often          ③ Most of the time          ④ Always</p>	<p>Alternative scale:          ⓪ Never or rarely          ① About 25% of the time          ② About 50% of the time          ③ About 75% of the time          ④ Always, 100% of the time</p>
<p>10. In the last 3 months, how often did you have loose, mushy or watery stools?</p>	<p>⓪ Never or rarely          ① Sometimes          ② Often          ③ Most of the time          ④ Always</p>	<p>Alternative scale:          ⓪ Never or rarely          ① About 25% of the time          ② About 50% of the time          ③ About 75% of the time          ④ Always, 100% of the time</p>

## **C1. Irritable Bowel Syndrome**

### **Diagnostic Criteria\***

Recurrent abdominal pain or discomfort\*\* at least 3 days/month in last 3 months associated with two or more of criteria #1 - #3 below:

*Pain or discomfort at least 2-3 days/month (question 1>2)*

*For women, does pain occur only during menstrual bleeding? (question 2=0 or 2)*

1. Improvement with defecation

*Pain or discomfort gets better after BM at least sometimes (question 4>0)*

2. Onset associated with a change in frequency of stool

*Onset of pain or discomfort associated with more stools at least sometimes (question 5>0), OR*

*Onset of pain or discomfort associated with fewer stools at least sometimes (question 6>0)*

3. Onset associated with a change in form (appearance) of stool

*Onset of pain or discomfort associated with looser stools at least sometimes (question 7>0), OR*

*Onset of pain or discomfort associated with harder stools at least sometimes (question 8>0)*

\* Criteria fulfilled for the last 3 months with symptom onset at least 6 months prior to diagnosis

*Yes. (question 3=1)*

\*\*"Discomfort" means an uncomfortable sensation not described as pain.

*In pathophysiology research and clinical trials, a pain/discomfort frequency of at least two days a week is recommended for subject eligibility.*

*Pain or discomfort more than one day per week (question 1>4)*

### **Criteria for IBS-C**

*(question 9>0) and (question 10=0)*

### **Criteria for IBS-D**

*(question 9=0) and (question 10>0)*

### **Criteria for IBS-M**

*(question 9>0) and (question 10>0)*

### **Criteria for IBS-U**

*(question 9=0) and (question 10=0)*