

peaceful, quiet environment and providing comfort will often relieve the symptoms in a short time. Application of a heating pad may also ease the discomfort (see [Nonpharmacologic \[Pain\] Management, Chapter 5](#)). If pain is not relieved by these simple measures, teach parents how to administer antispasmodics if prescribed. For example, if pain is precipitated by meals, having the child take the medication 20 to 30 minutes before mealtime may prevent an episode.

The most valuable assistance that the nurse can provide is support and reassurance to the family. When open communication is established and families are able to see a relationship between stress-provoking situations and the child's symptoms, the chance for remedial action is enhanced. Follow-up care and continued support are essential because the symptoms tend to remit and exacerbate; therefore, the availability of a supportive health professional can be a source of comfort to the child and family.

Irritable Bowel Syndrome

IBS is classified as a functional GI disorder. Children with IBS often have alternating diarrhea and constipation, flatulence, bloating or a feeling of abdominal distention, lower abdominal pain, a feeling of urgency when needed to defecate, and a feeling of incomplete evacuation of the bowel. These symptoms should be present for 6 months or longer and present for at least 3 days per month over the last 3 months ([Wadlund, 2012](#)). IBS has been identified as a cause of RAP in 21% to 45% of school-age children ([Rajindrajith and Devanarayana, 2012](#)). Typically there are no abnormal physical findings on exam. Many children with symptoms appear active and healthy and have normal growth.

The cause of IBS is not clear, but it is believed to involve a combination of autonomic and psychological factors. Children with IBS are evaluated to rule out organic causes of their symptoms, such as IBD, lactose intolerance, and parasitic infections. The long-range goal of treatment is development of regular bowel habits and relief of symptoms.

Nursing Care Management

The disorder is stressful to children and parents, and the primary nursing goal is family support and education. The nurse provides