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Dietitians' perspectives on clinical pathways and practice in relation to the dietary management of irritable bowel syndrome in the UK: A qualitative study

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Irritable bowel syndrome (IBS) is a chronic and relapsing gastrointestinal condition which negatively impacts quality of life⁽¹⁾. Dietary triggers are common and dietary management is central to the IBS treatment pathway with dietitians being the main education providers for patients⁽²⁾. The aim of this study was to explore the perceptions of dietitians towards current practices in IBS services in clinical settings across the UK.

Qualitative semi-structured interviews were undertaken to explore current practices, barriers, and facilitators to dietetic practice and expected treatment outcomes. Eligible participants were dietitians specialising in IBS and working in the National Health System (NHS) in the UK. Interviews were held virtually. Audio was recorded and transcribed following intelligent transcription. Data were analysed using template analysis⁽³⁾.

Thirteen dietitians (n=12 female) specialising in gastroenterology consented to participate in the study. Dietitians were working in various NHS Trusts across the country (Southeast England n=3; Southwest England n=3; Northwest England n=2; Northeast England n=1; West Midlands n=1; Southwest Wales n=1 and Southcentral Scotland n=2). Ten out of 13 dietitians had more than five years of experience in IBS management. Three main themes emerged: 1) Dietetic services as part of IBS referral pathways; 2) Practices in relation to dietetic services and 3) Implications of services on patients' expectations and feelings. Each main theme had subthemes to facilitate the description and interpretation of data. The increasing number of IBS referrals to dietitians and the need for accurate and timely IBS diagnosis and specialist IBS dietitians was reported, alongside the use of digital innovation to facilitate practice and access to dietetic care. The use of Internet as a source of (mis)information by patients and the limited time available for educating patients were identified as potential barriers to dietetic practice. Dietitians follow a patient-centred approach to dietary counselling and recognise the negative implications of perceived IBS-related stigma by patients on their feelings and treatment expectations.

The study identified areas and practices which can facilitate access to dietetic services and patient-centred care in IBS management as outlined in guidelines⁽⁴⁾.

References

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