

# NAVIGATING IBS: FROM SYMPTOMS TO SOLUTIONS

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American Association of  
NURSE PRACTITIONERS®

## INTRODUCTION

**Only 5-7%**  
of people with  
IBS have been  
formally  
diagnosed.

- IBS is common yet often misunderstood, long dismissed as vague “stomach trouble” due to stigma and limited scientific understanding.
- Modern research redefines IBS as a complex gut-brain disorder, leading to evidence-based, patient-centered diagnostic and treatment pathways.
- Nurse practitioners play a key role in patient education, communication, and shared decision-making to improve IBS care outcomes

## OBJECTIVES

The goal was to develop an accredited live symposium, on-demand conference platform and enduring CE activity for NPs that addresses knowledge and practice gaps in IBS through the following LOs:

- 1 Describe the pathophysiologic fundamentals of irritable bowel syndrome (IBS)
- 2 Review expert consensus best practices for diagnosing and characterizing IBS
- 3 Identify standard-of-care treatment pathways for patients with IBS-C and IBS-D
- 4 Implement patient-centric IBS management using shared decision-making

## DESIGN & METHODS

### CE activity and assessments

- Formats included an accredited live symposium & on-demand session at AANP 2024 Fall Conference (1.0-hr CE credit and 0.5-hr Rx credit) and was endured on AANPs LMS from Sept. 2024-Sept. 2025
- Before the activity, learners answered knowledge and confidence questions, which were developed based on LOs, with linkage to the needs assessment and content (pre-activity responses)
- After the activity, learners answered the same knowledge and confidence questions (post-activity responses) and activity evaluation questions

### Data analysis

- Descriptive statistics were used for demographic and evaluation data
- McNemar test for each multiple-choice knowledge/case questions
- Wilcoxon test for % pre/post correct knowledge/case questions, and the confidence rating scale questions
- Likert responses were analyzed with Chi-square tests and paired analyses, respectively (significance level,  $P \leq .05$ )

## RESULTS: PROGRAM REACH

- **10,264 learners** (559 for the live symposium & OnDemand platform and 9705 for the enduring activity)
- **7262 learners** completed the activity (all formats)

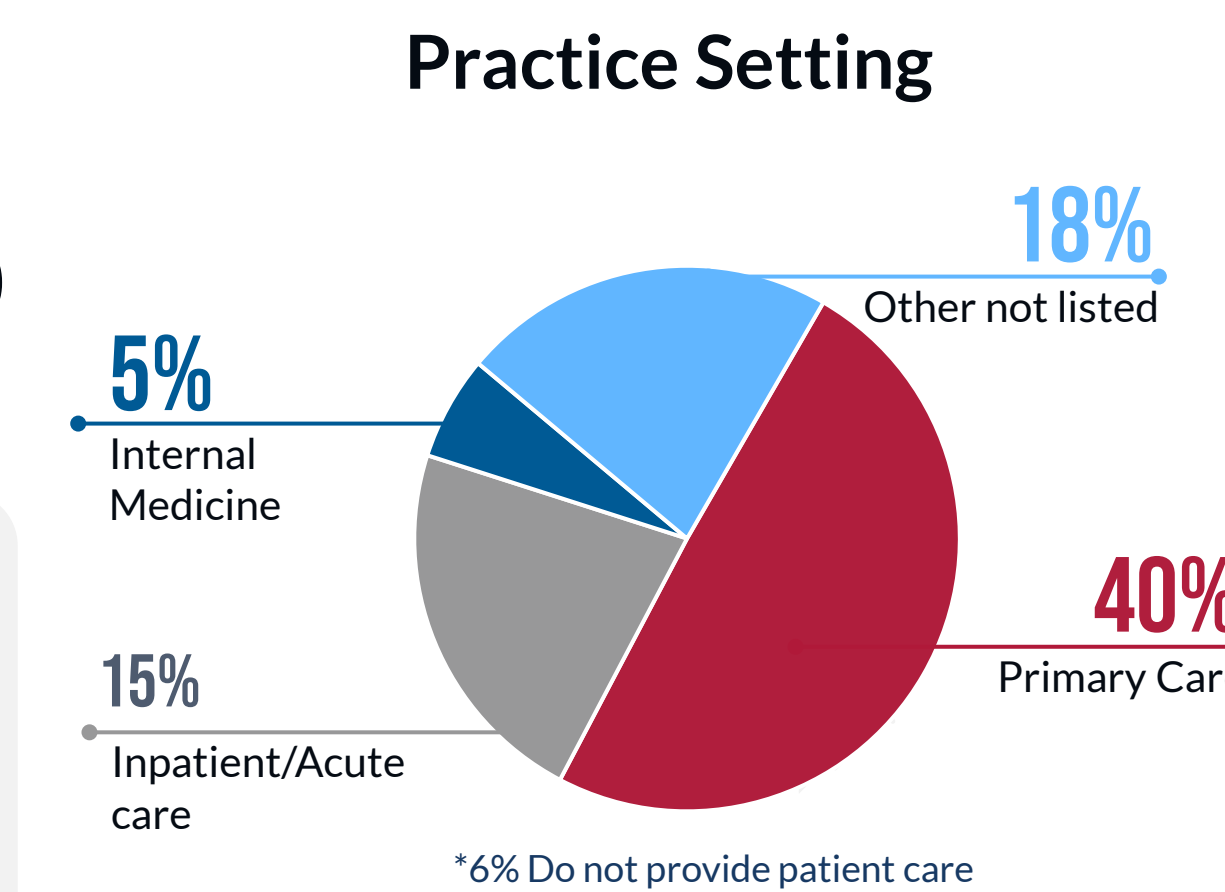
The activity reached the target audience:

**90%**

NPs providing direct patient care

**94%**

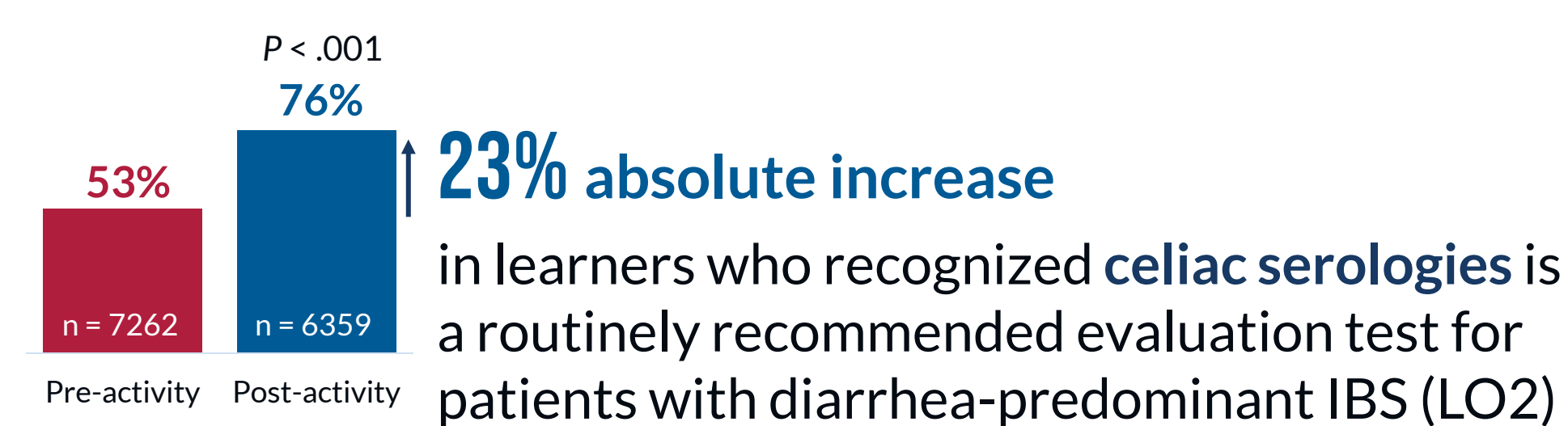
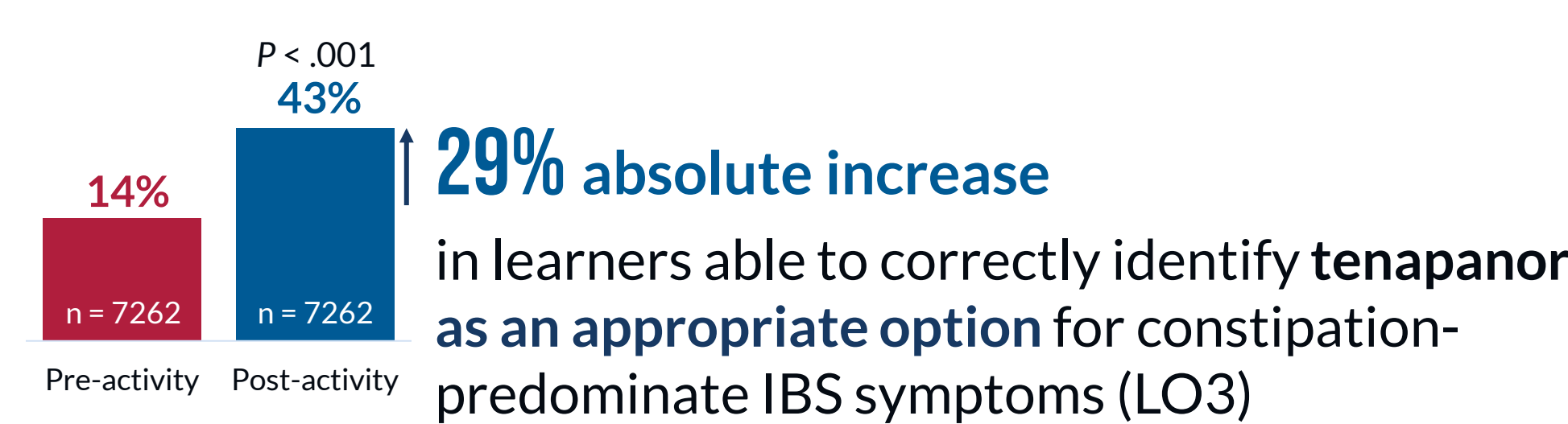
Nurse Practitioners



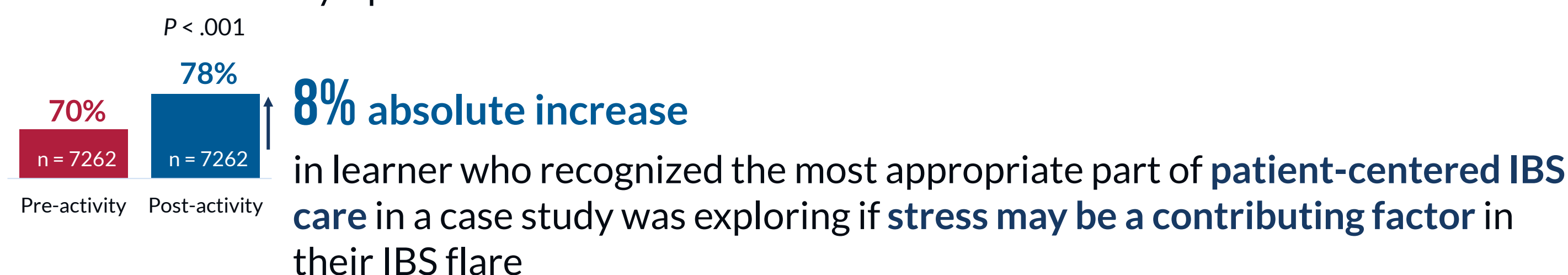
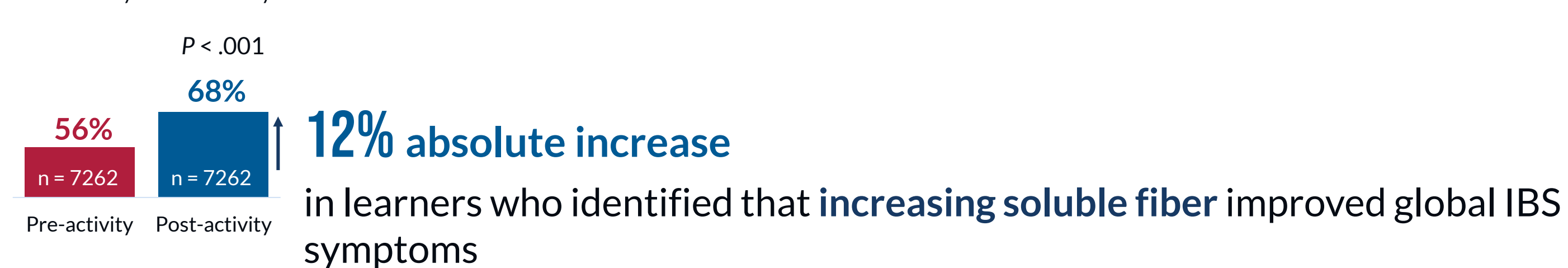
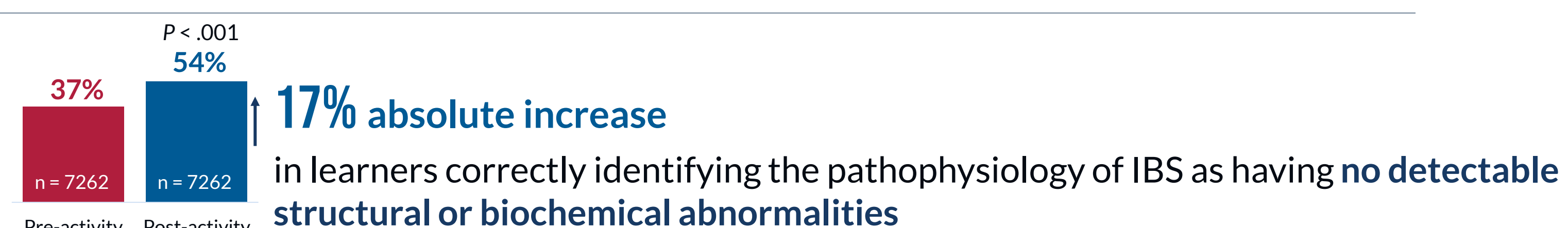
## RESULTS: KNOWLEDGE CHANGE

**+16%** absolute increase in average percent correct answers overall from pre- to post-activity results (5 MCQs)

### Greatest improvements from pre- to post-activity



### Remaining results from pre- and post-activity



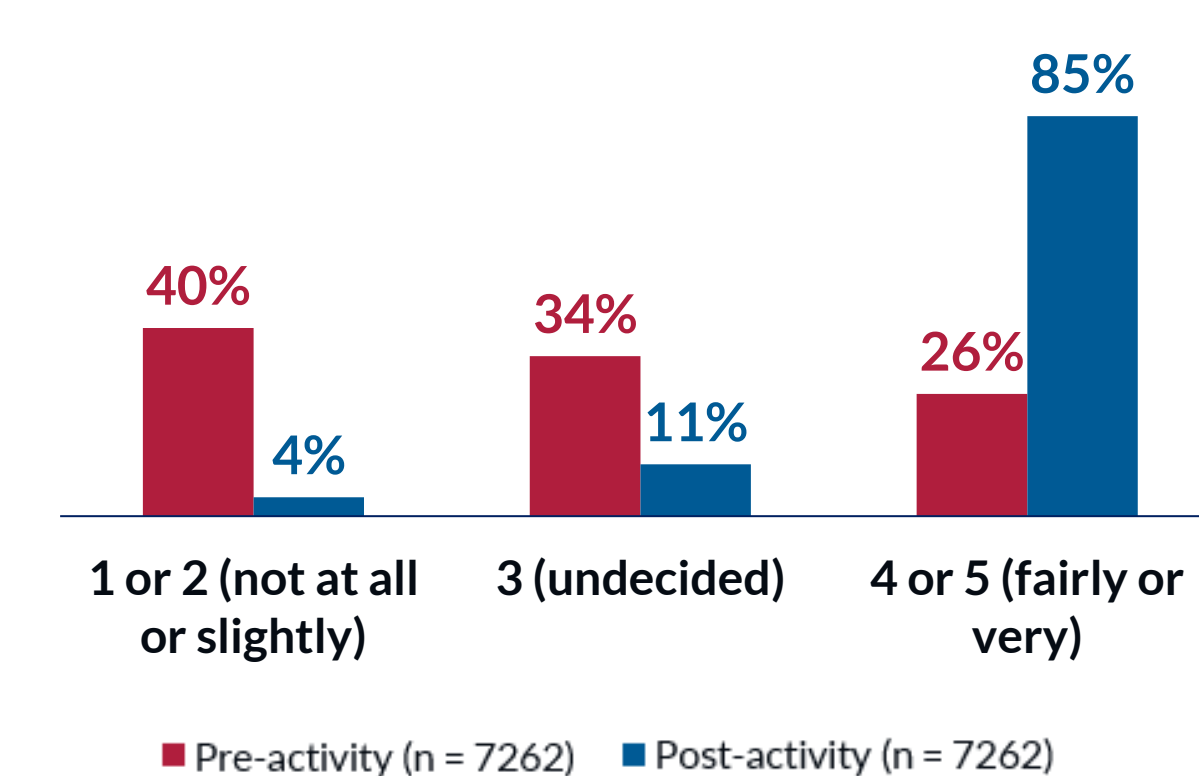
### Learner feedback

“I am better equipped to recognize symptoms of IBS while gathering medical history and can refer patients to gastroenterology for treatment of IBS.”

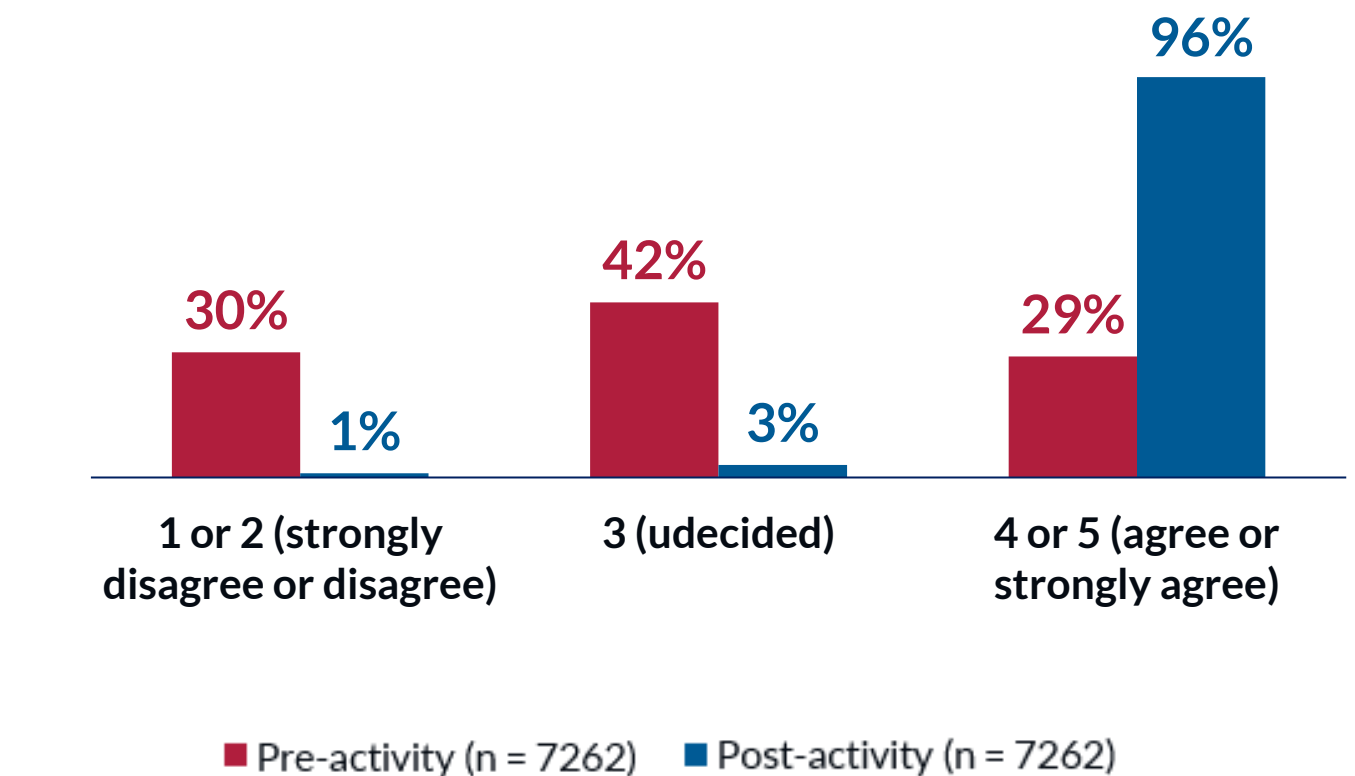
“I will trial other medications besides just MiraLAX and Imodium to treat IBS symptoms. I need to get more creative with those other meds because they can be after and more effective long-term.”

## RESULTS: KNOWLEDGE/CONFIDENCE

### Confidence level in diagnosing IBS using the ROME IV criteria



### Self-report knowledge gain in being able to explain the pathophysiology of IBS clearly



## RESULTS: PLANNED CHANGE

77% of learners planned to make changes to their practice based on this activity

## RESULTS: PATIENT IMPACT

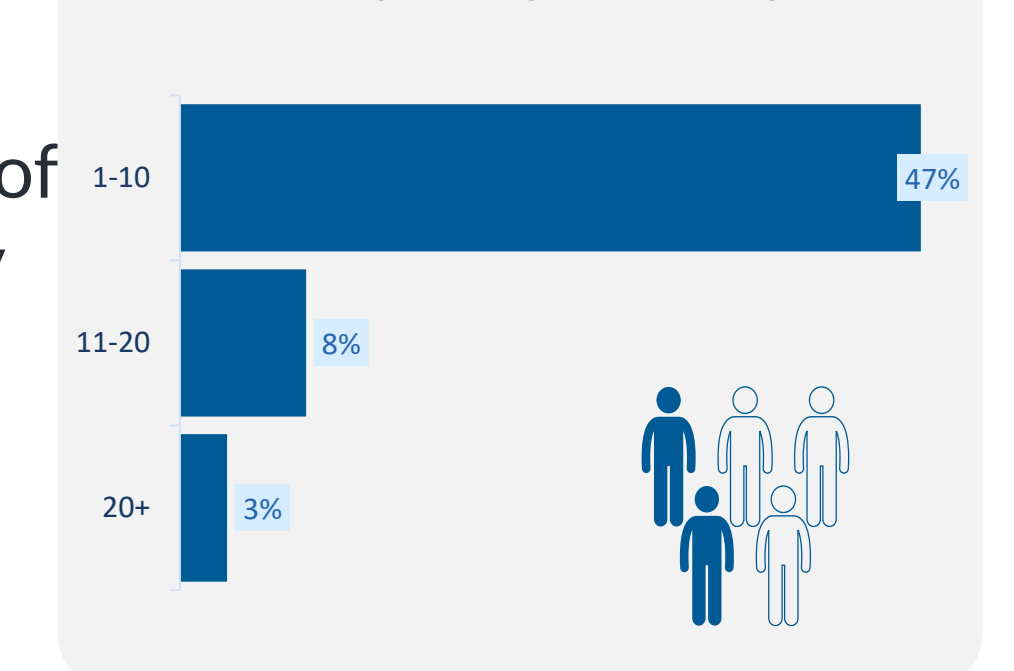
60-day follow up:

- **57%** (n=43) reported patient impact after the activity
- **49%** (n=37) reported an increase in the number of patients identified as having IBS after the activity

### Observed patient outcomes:

- “Increased knowledge”
- “Patient interested in learning disease progress”
- “Increased patient education”
- “Increased patient satisfaction with treatment plan”

Self-report patients impacted from activity over past 60 days



## DISCUSSION & RELEVANCE

The activity improved knowledge and confidence among learners, but some knowledge gaps persisted

- **Strongest Gains:** Learners showed the greatest improvement in pharmacotherapy knowledge (+29%) and positive diagnostic strategy with limited testing in the absence of alarm features (+23.7%), reflecting strong engagement with evidence-based treatment selection and diagnostic accuracy.
- **Areas for Reinforcement:** More modest gains in clinical case management (+8.5%) and dietary modification (+11.9%) suggest continued need for applied, case-based learning to strengthen decision-making in complex scenarios.
- Strong intent to change practice and reported patient impact at 60 days support the relevance of emphasizing positive diagnostic strategies and multidisciplinary collaboration to improve IBS care.

## ACKNOWLEDGEMENTS

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