



WP2: Case-control recruitment and follow up	Security: PU	1/14
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Project No. 848228

DISCOVERIE

Development, diagnostic and prevention of gender-related Somatic and mental COmorbitiEs in iRritable bowel syndrome in Europe

Work package 2 Deliverable D2.2

Report on IBS pattern comorbidities in prospectively deeply phenotyped cohort

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Dissem	ination Level		
PU	Public	Х	
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RE	Restricted to a group specified by the consortium (including the Commission Services)		
СО	Confidential, only for members of the consortium (including the Commission Services)		





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List of Abbreviations

GI Gastrointestinal

IBS Irritable Bowel Syndrome

CRF Case Report Form

CFS Chronic Fatigue Syndrome

GAD7 Generalised Anxiety Disorder 7-item scale

PHQ Patient Health Questionnaire
IBS-SSS IBS- Symptom Severity Scale
FIQ Fibromyalgia Impact Questionnaire

BTQ Brief Trauma Questionnaire

MFI Multidimensional Fatigue Inventory

MINI Mini International Neuropsychiatric Interview

WP Work Package SD Standard deviation





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Executive summary

Background

Irritable bowel syndrome (IBS) is one of the most common gastrointestinal diseases. In addition to the already debilitating chronic or recurrent gastrointestinal (GI) symptoms, a significant proportion of IBS patients, up to 60-70%, also report mental (such as anxiety, depression) and somatic (such as fibromyalgia, chronic fatigue syndrome) comorbidities, which seem to influence overall disease severity and outcomes. in addition to GI symptoms. While much has been gained recently in the understanding of the origin of IBS-alone, current knowledge on the aetiology and pathophysiology of comorbid IBS is poor and overtly unproven, rendering strategies for prevention, positive diagnosis, and prognosis unsatisfactory and inefficient due to the lack of sensitive and specific biomarkers.

Aim

In the DISCOvERIE project the overall aim is to understand similarities and differences among patients with IBS with and without comorbidities, and to demonstrate mechanisms underlying these differences and similarities. Specifically in this deliverable report, the aim is to describe the clinical and demographic patterns at baseline of the deeply phenotyped participants that will be extensively studied in this project regarding factors of importance in the gut and the brain for disease severity and outcomes.

Methods

IBS patients fulfilling the latest diagnostic criteria, the Rome IV criteria, and disease controls (i.e. patients with the comorbid conditions, but no IBS), and healthy controls were prospectively recruited at nine European centers. Upon inclusion, the subjects were thoroughly characterized through a clinical interview regarding demographic and disease-related information, health history, medications, hereditary factors, infections, and lifestyle following clinical routines and by using and completing a standardized Case Report Form. Besides, to extensively assess the severity of these comorbidities, the subjects completed a set of validated questionnaires.

For the analyses, participants were divided into groups:

- IBS patients without comorbidities (IBS alone);
- IBS patients with only mental or somatic comorbidities (comorbid IBS);
- IBS patients with both somatic and mental comorbidities (multi-comorbid IBS);
- Disease controls without IBS (with depression and/or anxiety, with chronic fatigue and/or fibromyalgia, and with both mental and somatic disorders);
- Healthy controls.

In this report demographic and clinical aspects, as well as results from questionnaires used to assess severity of GI and overall non-GI somatic symptoms, fibromyalgia, fatigue, anxiety, and depression, as well as significant traumatic events were compared between these groups. In addition, associations between severity of GI and non-GI somatic symptoms, mental symptoms and traumatic events were determined.





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Results

In this report, data from 867 subjects were analysed. An overall female predominance (as expected) was seen in the IBS groups, and this was even more clear in the IBS groups with comorbid conditions. A lower level of education and a more absence from work were observed in the groups with comorbid conditions. The use of restrictive diets was commonly seen in IBS, especially among those with comorbid conditions. A tendency towards more reports of allergy as well as a history of COVID-19 were seen in the IBS groups with comorbidities, but also in the disease controls. Medication use was relatively common among subjects, and this was especially seen in the IBS groups with comorbidities and the disease controls for antidepressants, benzodiazepines, antiepileptics and opioids. IBS symptom severity gradually increased with increasing number of comorbidities. In general, congruent findings in the different groups regarding severity of fatigue, fibromyalgia symptoms, overall somatic symptoms, anxiety and depression were demonstrated, with the highest severity in the groups with the respective comorbidity / morbidity (fatigue, fibromyalgia, anxiety and depression), and the most severe symptoms in the multicomorbid groups. Significant traumatic events were commonly reported, in particular in the multicomorbid groups, but the association with severity of somatic and mental symptoms were modest. The severity of GI, other somatic and mental symptoms were moderately to strongly intercorrelated, with the strongest associations between non-GI somatic and mental symptoms. The same pattern was seen in the total sample and in the individual groups separately (IBS, disease controls and healthy controls)

Conclusion

In conclusion, these results strengthen the importance of mental and somatic comorbid conditions and symptoms in IBS, and their influence on outcomes and disease burden. The large and extremely well characterized group of IBS patients and control groups recruited in this project can now be used to further study the importance of different factors in the gut and the brain for IBS, its comorbidities and disease outcomes, and the relative importance of peripheral vs central factors for symptoms in IBS.





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Short Introduction

Irritable bowel syndrome (IBS) is a common chronic functional gastrointestinal (GI) disorder, characterized by abdominal pain, excess gas and diarrhoea or constipation, predominantly seen in young and mid-age females. IBS constitutes 20-50% of the outpatient gastroenterology workload and is regularly encountered in general practice. However, there are a significant number of IBS patients, up to 60-70%, whose clinical severity is greatly magnified by the presence of mental (such as anxiety, depression) and somatic (such as fibromyalgia, chronic fatigue syndrome) comorbidities in addition to the already debilitating GI symptoms. While much has been gained recently in the understanding of the origin of IBS-alone, current knowledge on the aetiology and pathophysiology of comorbid IBS is poor and overtly unproven, rendering strategies for prevention, positive diagnosis, and prognosis unsatisfactory and inefficient due to the lack of sensitive and specific biomarkers.

Therefore, in this project the aim is to understand similarities and differences among patients with IBS with and without comorbidities, and to demonstrate mechanisms underlying these differences and similarities. To achieve this, patients with IBS with and without these comorbidities, as well as a small group of healthy control subjects without these conditions, and a group of patients with the comorbid conditions but without IBS, will be included in this pan-European project, with the aim to compare the different aspects within and between the groups. In this deliverable report, the pattern of comorbidities in the recruited participants will be described with focus on clinical and demographic factors determined at baseline in this prospective research program.





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Main part

Methods

In order to achieve this, IBS patients fulfilling the latest diagnostic criteria, the Rome IV criteria, and disease controls (i.e. patients with the **comorbid** conditions, but no IBS), and healthy controls were prospectively recruited at nine European centers (UGOT, KUL, VHIR, UNIBO, UM, UMF, RUMS, GUF, SU) (Figure 1).

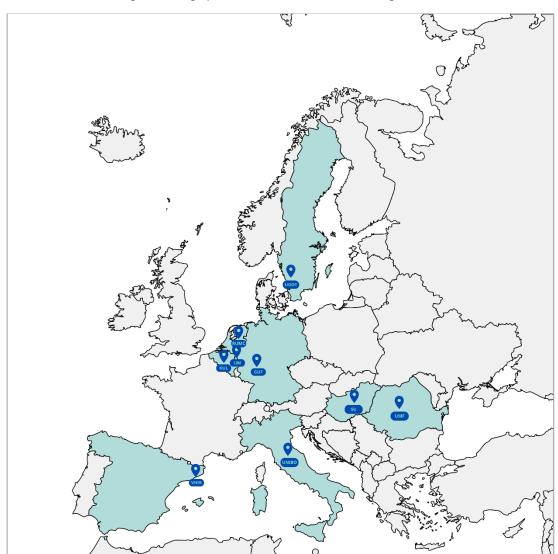


Figure 1 Geographical distribution of WP2 recruiting centers





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The participating centers identified and recruited IBS patients without comorbidities (IBS alone), IBS patients with only mental *or* somatic comorbidities (comorbid IBS), and IBS patients with *both* somatic and mental comorbidities (multi-comorbid IBS). Moreover, disease controls without IBS (with depression and/or anxiety, with chronic fatigue and/or fibromyalgia, and with both mental and somatic disorders) and a small group of healthy controls were also recruited.

Upon inclusion, the subjects were thoroughly characterized through a clinical interview following clinical routines and by using and completing a standardized Case Report Form (CRF; appendix 1) during the interview. In the CRF, information regarding demographic and disease-related information, health history, medications, hereditary factors, infections and lifestyle was collected, together with diagnostic criteria for IBS, i.e. the Rome IV criteria, and psychosocial assessment with validated diagnostic criteria for depression, anxiety (MINI interview), and somatic comorbidities (fibromyalgia and chronic fatigue syndrome). Besides, to extensively assess the severity of these comorbidities, the subjects completed a set of validated questionnaires (see below and appendix 2). The clinical data, as well as the CRF and questionnaires were collected using a multilingual digital platform created for this project (Electronic data capture, CASTOR).

Questionnaires and interview:

The study subjects completed the following self-administered questionnaires and interview-based assessment at baseline. These will be repeated during follow-up (see appendices 1 (CRF) & 2 (questionnaires)):

Case Report Reform based on clinical interview with the information included: patient / subject identification and demographic data, clinical history (IBS- and GI-related; anxiety, depression, fibromyalgia, chronic fatigue syndrome), dietary history, personal and family medical history (general), substance use, medications, clinical Investigations. The diagnoses of IBS, somatic comorbidity, i.e. fibromyalgia or chronic fatigue syndrome (CFS), were determined during the clinical interview, using accepted diagnostic criteria, and presence of the mental comorbid conditions were determined using a structured diagnostic interview (MINI), see below.

Rome IV Questionnaire, bowel and gastroduodenal modules: defines presence of symptoms compatible with functional bowel and gastroduodenal disorders according to the Rome IV criteria.

IBS Severity Scoring System (IBS-SSS): a five-item questionnaire (visual analogue scales) measuring the severity of IBS symptoms, with cut-off levels to define mild, moderate and severe IBS.

Patient Health Questionnaire-15 (PHQ-15): assessment of presence and severity of 15 somatic symptoms, used to identify subjects with a risk of and severity of somatoform disorder / somatization, with cut points to define mild, moderate and severe somatic symptom severity.

Generalized Anxiety Disorder 7-Item Scale (GAD-7): anxiety measure including seven anxiety symptoms, with cut-off levels for mild, moderate, and severe anxiety.

Patient Health Questionnaire-9 (PHQ-9): a depression module, which scores each of the nine DSM-IV criteria for depression and can be used to monitor the severity of depression and to make a tentative diagnosis of depression. The questionnaire has cut points for mild, moderate, moderately severe, and severe depression.

Multidimensional Fatigue Inventory (MFI): a 20-item scale designed to evaluate the severity of fatigue, assessing five dimensions of fatigue: general fatigue, physical fatigue, reduced motivation, reduced activity, and mental fatigue.





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Fibromyalgia Impact Questionnaire (FIQ): measures the severity of fibromyalgia across three domains, i.e. function, overall impact and symptoms.

The Brief Trauma Questionnaire (BTQ): The BTQ is a brief self- report questionnaire that is derived from the Brief Trauma Interview (Schnurr et al., 1995). The BTQ was originally designed to assess traumatic exposure according to DSM-IV but specifically asked only about Criterion A.1 (life threat/serious injury).

The Mini International Neuropsychiatric Interview (MINI): a brief structured diagnostic interview for the major psychiatric disorders; it assesses the 17 most common disorders in mental health. For the purpose of this report, the focus was on diagnosing anxiety and depression, to define mental comorbidity as defined previously.

Statistical analysis

All statistics were performed in SPSS version 28. Descriptive statistics were used to analyse the demographic, dietary, and clinical characteristics of the total sample and study groups, and data were presented as mean and standard deviation (SD), or number (n) and proportion (%), as appropriate. Comparison of mean scores of the questionnaires between the participant groups were performed with ANOVA with subsequent postdoc groupwise comparisons with Bonferroni corrections. The A Chi-square test was conducted to analyse differences between groups regarding BTQ (presence vs absence of significant traumatic event). Pearson correlation analyses were performed to analyse associations between the study questionnaires in the total sample, and separately in the IBS patients, the disease controls and the healthy controls, respectively. A Point-Biserial Correlation, a special case of the Pearson correlation, was used to analyse the correlations between BTQ and the remaining questionnaires. In general p<0.05 was considered statistically significant.





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Results

Subjects

We included 811 participants with complete data at baseline, of which 568 will be followed up longitudinally with re-assessments 1 and 2 years after inclusion (table 1, appendix 3). Relative to the study proposal, a slight over recruitment in the group who will be followed up longitudinally can be noted, and this was due to expected dropouts during follow-up to reach the target of 500 longitudinally followed participants. Recruitment of patients with both mental and somatic comorbidities (IBS Multicomorbid) who were willing to participate in the study was found to be more difficult than expected, so the recruitment in this group was lower than expected / planned, and partly compensated by higher recruitment for some of the other groups. Summarizing graphs of the total recruitment divided into the participants planned for only cross-sectional assessment (i.e. only baseline, no follow-up) and longitudinal assessment (1- and 2-year follow-ups planned) are displayed in appendix 3, figures 2 and 3. For the analyses in this report, we use data from n=867 participants, as we also include participants with valid but incomplete data at baseline, to make this report as comprehensive as possible.

Demographic and clinical factors

The tables for this and the next paragraph are displayed in appendix 4 (tables 2-14). Regarding demographic data, it can be noted that the mean age was similar across the IBS groups, but slightly lower in the healthy controls and higher in the disease controls without IBS (with depression and/or anxiety, with chronic fatigue and/or fibromyalgia, and with both mental and somatic disorders). As expected, there was a female predominance in the IBS groups, and this was even more pronounced in the comorbid and multicomorbid groups. The level of education tended to be lower in the groups (both IBS and disease controls) with somatic comorbidities and in the multicomorbid groups, and in these groups a lower proportion worked full time and a higher proportion were unable to work (table 2). Regarding clinical history of IBS symptoms among the IBS subjects, the duration, or the onset of symptoms (initiating events such as GI infection and surgery) were similar among groups, but there was a tendency towards a larger proportion of IBS patients with comorbid conditions that had visited a physician in secondary / tertiary care for their problems compared to participants with IBS without comorbidities (table 3). Following different restrictive diets were more commonly reported by the IBS patients, and in particular among those with comorbid conditions. In line with this a larger proportion of IBS patients with comorbidities reported that they avoided certain food products due to IBS symptoms and also that they found it to be helpful. Probiotic use was more common among IBS patients overall than among healthy controls or disease controls, and this was most clearly noted in the group with somatic comorbidities and in the multicomorbid group (table 4). In our sample, previous surgical procedures (appendectomy, cholecystectomy and hysterectomy) were not more commonly reported by IBS patients than what was seen in the control groups. Expected differences across groups were noted for previous history of anxiety, depression, fibromyalgia and chronic fatigue. Slight tendencies towards higher proportion of subjects reporting allergy and history of COVID-19 were seen in the comorbid groups (table 5). Among subjects with IBS, a family history of IBS and chronic abdominal symptoms was commonly reported, and this tended to be more common among IBS patients with comorbidities, and the same patterns were seen for family history of anxiety and depression, as well as for fibromyalgia and chronic fatigue (table 6). Alcohol use and smoking was not clearly different among groups (table 7). A variety of different medications were used by the participants, and there was a clear trend toward higher use





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of medications in the comorbid groups, which was especially true for antidepressants, benzodiazepines, anti-epileptics and opioids, but there was no clear difference among IBS groups regarding the use of peripherally acting GI pharmacological agents (table 8).

Severity of symptoms related to the comorbid conditions, assessed with guestionnaires.

Mean scores of the different questionnaires can be seen in table 9, with posthoc groupwise comparisons (with Bonferroni corrections) in table 10. For all questionnaires, differences across groups were demonstrated.

The IBS symptom severity, measured with IBS-SSS, was higher in the IBS groups compared with the healthy controls and the disease controls groups (i.e. mental and or somatic disorders without IBS), which of course was expected. Among the IBS groups, the most severe IBS symptoms were seen in the group with multiple comorbidities, with significant differences vs the IBS alone and IBS comorbid mental group. The disease control groups had more severe IBS symptoms than the healthy controls.

Regarding fatigue, measured with MFI, and fibromyalgia severity, measured with FIQ, a general pattern with the most severe symptoms in the groups (both the IBS groups and the disease control groups) where somatic morbidity / comorbidity was present (i.e IBS comorbid somatic, IBS multicomorbid, control somatic and control somatic + mental). IBS patients with only mental comorbidity reported more severe fatigue and fibromyalgia symptoms than IBS alone. Healthy controls reported the lowest level of fatigue and fibromyalgia symptoms, significantly lower than all other groups. For overall somatic symptoms, measured with PHQ-15, the same pattern as for fatigue and fibromyalgia symptoms were seen, except for higher overall somatic symptom severity in the IBS multcomorbid than in the disease somatic + mental control group (without IBS), which most likely can be explained of the inclusion of three GI symptoms in PHQ-15.

Severity of anxiety, measured with GAD-7, and depression, measured with PHQ-9, were highest in the groups (both the IBS groups and the disease control groups) where mental morbidity / comorbidity was present (i.e IBS comorbid mental, IBS multicomorbid, control mental and control somatic + mental), with the multicomorbid groups demonstrating the most severe anxiety and depression symptoms. This pattern was more distinct in the IBS group and tended to be more evident for depression than for anxiety. IBS patients with only somatic comorbidity reported similar severity of anxiety as the group with IBS alone, whereas the levels of depression tended to be higher. Healthy controls reported the lowest levels of anxiety and depression, significantly lower than all other groups.

In the BTQ, the participants report absence (score 0) or presence (score 1) of significant traumatic events. Differences in the proportion of subjects reporting significant traumatic events were noted across groups, being most common in groups with mental comorbidity / morbidity and in the multicomorbid groups (table 11).

In the total sample, significant correlations were seen between all questionnaires, except for BTQ and IBS-SSS. Small to medium correlations were observed between IBS symptom severity and the other questionnaires, except for a strong correlation with overall somatic symptom severity. Small correlations were noted between BTQ and the other questionnaires. Between all the other questionnaires (severity of anxiety, depression, fatigue, fibromyalgia and overall somatic symptoms) strong correlations were seen (table 12). Similar patterns were seen when performing the correlation analyses separately in the IBS patients (table 13), the disease controls (table 14) and the healthy controls (table 15).





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Summary and Conclusion

- An overall female predominance (as expected) in the IBS groups, and this was even more seen in the IBS groups with comorbid conditions.
- Lower level of education and a more absence from work in the groups with comorbid conditions
- The use of restrictive diets was commonly seen in IBS, especially among those with comorbid conditions.
- A tendency towards more reports of allergy as well as a history of COVID-19 were seen in groups with comorbidities.
- Medication use was relatively common among subjects, and this was especially seen in the groups with comorbidities for antidepressants, benzodiazepines, anti-epileptics and opioids.
- IBS symptom severity demonstrated a gradual increase with increasing number of comorbidities.
- In general, congruent findings in the different groups regarding severity of fatigue, fibromyalgia symptoms, overall somatic symptoms, anxiety and depression were demonstrated, with the highest severity in the groups with the respective comorbidity / morbidity (fatigue, fibromyalgia, anxiety and depression), and the most severe symptoms in the multicomorbid groups.
- Significant traumatic events were commonly reported, in particular in the multicomorbid groups. The association with severity of somatic and mental symptoms were modest.
- The severity of GI, other somatic and mental symptoms were moderately to strongly intercorrelated, with the strongest associations between non-GI somatic and mental symptoms.

In conclusion, these results strengthen the importance of comorbid mental and somatic conditions and symptoms in IBS, and their influence on outcomes and disease burden. The large and extremely well-characterized group of IBS patients and control groups recruited in this project can now be used to further study the importance of different factors in the gut and the brain for IBS, its comorbidities and disease outcomes, and the relative importance of peripheral vs central factors for symptoms in IBS. We believe that this will be of great importance when actively treating these patients, trying to improve their quality of life.





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Author contribution

The work of this report is a joint effort by the DISCOVERIE Consortium. The leader of WP2, Prof Magnus Simrén has together with his collaborators, in particular Dr Ines Trindade and Medical student Mahrukh Kahdija, and with close support from Consuelo Cammarota (Project Manager) and Dr Amanda Rodriguez-Urrutia (WP2 Co-Leader), prepared the database, analysed the information from the contributing centres, and prepared the report. Access to data in the cohorts have been granted from nine different centres, UGOT, KUL, VHIR, UNIBO, UM, UMF, RUMS, GUF, SU.

CRF Patient version

1. Patient identification and demographic data Initials

nitials	:
Date completed	:
Date of birth (D/M/Y)	://
Hospital patient numbe	er:
Gender	: M / F/ Other
Ethnic Origin	
Country of origin of ma	ternal grandparents:
Grandmother	Grandfather
Country of origin of pat	ernal grandparents:
Crandmathar	Crandfathor

Drop down:

- Albania	- Liechtenstein
- Andorra	- Lituania
- Armenia	- Luxemburg
- Austria	- Macedonia
- Azerbaidzhan	- Malta
- Belarus	- Moldova
- Belgium	- Monaco
- Bosnia and Herzegovina	- Montenegro
- Bulgaria	- Netherlands
- Croatia	- Norway
- Cyprus	- Ukraine
- Czech Republic	- Poland
- Denmark	- Portugal
- Estonia	- Romania
- Finland	- Russia
- France	- San Marino
- Germany	- Serbia
- Georgia	- Slovenia
- Greece	- Slowakia
- Greenland	- Spain
- Hungary	- Sweden
- Ireland	- Switzerland
- Iceland	- Turkey
- Italy	- United Kingdom
- Kazakhstan	- Vatican City
- Latvia	- Unknown
	- Not European

Were you born by cae Were you breastfed in	□ no	□ yes	yes	
Education:	No University degreeUniversity degreeDoctoral studies (PhD)			
Present work status:	 □ Full-time □ Part-time □ Student □ Full time home maker (taking care of family □ Unable to work since at least 1 month, but I □ Unable to work since more than 1 year (disa □ Unemployed (not due to health problem) □ Work shifts (day/night □; morning/afternoo □ Retired 	ess thar ability)	-	
Recruited from:	 Primary care Secondary care Tertiary care Public advertisement 			

2. Clinical history	
What is the frequency of your symptoms? :	O never O at least 3 times/month O less than 1 day/week O 1-2 days/week O ≥3 days/week O every day O unknown
During the first period of your IBS complaints, did sym	O acute O gradually O unknown
☐ Other infe☐ Stressful li☐ antibiotics☐ abdomina☐ not clear☐ Change of☐ Other, spec	I surgery diet ; If yes, when? ify
What is the duration of your IBS symptoms (time since(months)	e onset of first symptoms)? :
Have you previously attended a physician for your pro Primary Secondary Tertiary	oblem (more than 1 option possible)? If so:
ROME IV IBS criteria bowel module:	
Did the patient have recurrent abdominal pain on average with symptom onset at least 6 months prior to diagnot following? (Please indicate which criteria are fulfilled, more Related to defecation Associated with a change in frequency of steep Associated with a change in form (appearant of the Rome IV criteria for IBS are not fulfilled, excluding the second of the Rome IV criteria for IBS are not fulfilled, excluding the second of the Rome IV criteria for IBS are not fulfilled, excluding the second of the second of the Rome IV criteria for IBS are not fulfilled.	osis, associated with two or more of the re options are possible): ool oce) of stool
Other symptoms:	
 □ Abnormal stool passage (straining, urgency □ Passage of mucus □ Bloating or feeling of abdominal distension □ Flatulence 	

Evoking factors:	Food in Stress Other			r	no no		yes yes	5			 		
Alarm symptoms/red	d flags:												
Anemia										no	ye	S	
Age at onset	above 45									no	ye	S	
Unintention	_	ss (4.5	5kg	past	t 3 r	non	ths)			no	ye		
Nocturnal sy	•									no	ye		
Rectal blood		-+-!								no	ye		
Family histo Fever	ry or colore	ctai ca	ince	er						no no	□ ye □ ye		
→If red flag normal.	: colonosco	py is ı	requ	uire	d. P	atie	nt c	an oı	nly be	incl			oscopy is
v v la la h		drate	– hi	gh f	fat						and	Poly	ols")
Do you follow dietar	y restrictior	ns bec	aus	e of	you	ır IB	S sy	mpto	ms?		no		yes
Do you avoid certain											no		yes
If yes, which If yes, does i	-						•••••			•	no		yes
Do you use pre-/pro	biotics on a	regul	ar b	asis	5?						no		yes
4. Personal his	story												
Appendectomy	:	□ n	0		yes								
Cholecystectomy	:	□ n	0		yes								
Hysterectomy	:	□ n	0		yes		IA						
Other abdominal sur	gery:	□ n	0		yes								
Mental disorders	:	□ n	_		yes								
Anxiety		□ n	ο 🗆	ye	es								

Depression	Ш	no	⊔ yes		
Other		no 🗆	ves		
			•		
Other relevant disease :	П	no	□ ves		
		110	□ yes		
Fibromyalgia :		no	□ yes		
Chronic fatigue (> 6 months):		no	□ ves		
em em em gue (e m em en e)			_ /		
Does the patient suffer from a	مالد م	orav.	ckin	no	□ voc
boes the patient surier from a	II alle	ergy .	- skin	no	□ yes
			- food	no	□ yes
			- ENT	no	ves

5. Family history

IBS □ no □ yes		
if yes, specify:	☐ first degree relative	
	☐ second degree relative	
Chronic abdominal symptoms (Pain, diarrhea, constipation)	
if yes, specify:	☐ first degree relative	
	☐ second degree relative	
Crohn's disease:	⊔ yes	
if yes, specify:	☐ first degree relative	
	second degree relative	
Ulcerative colitis: □ no	□ yes	
	☐ first degree relative	
ii yes, specity.	□ second degree relative	
MENTAL DISORDERS	_ second degree relative	
Depression		
·	☐ first degree relative	
, , ,	□ second degree relative	
Anxiety	□ no □ yes	
if yes, specify:	☐ first degree relative	
	☐ second degree relative	
Other	□ no □ yes	
if yes, specify:	☐ first degree relative	
	\square second degree relative	
SOMATIC DISORDERS		
Fibromyalgia:	□ no □ yes	
if yes, specify:	☐ first degree relative	
	☐ second degree relative	
Chronic fatigue (> 6 months):	□ no □ yes	
if yes, specify:	☐ first degree relative	
	☐ second degree relative	
Do you have a twin sibling?	□ no	□ voc
If yes, do you have an id	☐ NO	⊔ yes
	dentical twin sibling? \(\square\) no e abdominal symptoms? \(\square\) no	□ yes
Does a first degree relative hav	· ·	⊔ yes □ yes
boes a first degree relative flav		□ yes
6. Substance use		
Alcohol no	yes units /week	
Smoking \square no	yes cigarettes/day, .	
Drugs □ no	yes, specify: main classes:	
		- Speed
		- LSD
		- Cannabis
		- Marihuana

- Opiates (Morfin, Heroïn,...)
- Cocaine
- Extasis
- Ketamin
- Methadone
- Other

2010 American College of Rheumatology Diagnostic Criteria Modified for Fibromyalgia

A patient meets the modified ACR 2010 criteria for Fibromyalgia if he meets the following conditions: 1. Generalized Pain Index (GDI) ≥7 and Symptom Severity Scale (EGS) ≥5 or GDI of 4-6 and EGS≥9 □ 2. Symptoms must be present for at least 3 months 3. The patient has no other disorder that can explain the pain Generalized Pain Index (GDI) (1 point for each area; score: 0-19) Put a cross over each area in which you have felt pain during the past week, keeping in mind that you should not include pain caused by other diseases that you suffer (osteoarthritis, tendinitis, etc.) Left Right **Scapular Waist Upper Half Arm Lower Half Arm** Hip **Upper Half Leg Lower Half Leg** Mandible Chest (Thorax) Abdomen **Upper Half Back Lower Half Back** Neck

Symptom severity scale (EGS) (Score: 0-12 points)

- 2. Indicate with a cross the severity of these symptoms during the past week, using the following scales, which are scored from 0 (mild) to 3 (severe):
- It has not been a problem
- Mild, occasional problem
- Moderate problem, almost always present
- Serious, ongoing, persistent problem

	NO	MILD	MODERATE	SEVERE
POINTS	0	1	2	3
A. FATIGUE				
B. NON- RESTORATIVE SLEEP				
C. COGNITIVE DISORDERS				

Check the appropriate box if you have suffered one of the symptoms during the last **6 months**:

	NO	YES
POINTS	0	1
A. HEADACHE		
B. PAIN OR WIRES		
IN THE LOWER		
PART OF THE		
ABDOMEN		
C. DEPRESSION		

CHRONIC FATIGUE SYMPTOMS

_	_		-									
Diagno	sis req	uires	that tl	ne patie	nt have	the fo	llowing	three	symptor	ns:		
1.	A sub	stanti	ial red	uction of	or impa	irment	in the	ability	to engag	e in i	pre-illne	25

 A substantial reduction or impairment in the ability to engage in pre-illness levels of occupational, educational, social, or personal activities, that persists for more than 6 r and is accompanied by fatigue, which is often profound, is of new or definite onset (no lifelong), is not result of ongoing excessive exertion, and is not substantially alleviated 						
	rest, and					
2.	Post-exertional malaise*, and					
3.	Unrefreshing sleep*					
At lea	st one of the two following manifestations is also required:					
1.	Cognitive impairment* or					
2.	Orthostatic intolerance					

^{*} Frequency and severity of symptoms should be assessed. The diagnosis of ME/CFS should be questioned if patients do not have these symptoms at least half of the time with moderate, substantial, or severe intensity.

7. Medical history Recent medication (last 3 months)

	Name	dose	indication	Start date?	Stop date?
Antidepressant					
ISRS					
TCAs ISRSN					
Heterocyclics					
Other					
o and					
NSAIDs					
(incl aspirin)					
Antibiotics					
Probiotics					
(capsulated or shots)					
Laxatives					
Acid					
suppressants					
Antispasmodic					
Antidiarrheal					
drugs					
Fytotherapy					
Prokinetic					
Linaclotide					
Lubiprostone					
Benzodiazepines					
Antipsychotics					
Antiepileptics					
Other					
	<u> </u>				

8. Investigations:Blood analysis:

Hb? date:/		no		yes		
uate/						
CRP?		no		yes		
date:,						
TSH? date://		no		yes		
transglutaminase antibodies/IgA values date:/		no		yes		
	IF	NO: EXCLU	DE p	atier	nt	
Coproculture: date:/						
Giardiasis (D-IBS):		no YES: EXCLU		•		ot performed
Lactose maldigestion:						
Symptoms improved following lactose free diet (6 week	(s):	□ no				yes
	IF	YES: EXCLU	DE p	atier	nt	
Endoscopy						
□ upper endoscopy: date://		no		yes		not performed
If yes, significant macroscopic abnormalities:		no		yes		
If yes, significant microscopic abnormalities:		no		yes		
□ colonoscopy: date:/		no		yes		not performed
If yes, significant macroscopic abnormalities:		no		yes		
If yes, significant microscopic abnormalities:		no		yes		
□ sigmoidoscopy: date://		no		yes		not performed
If yes, significant macroscopic abnormalities:		no		yes		
If yes, significant microscopic abnormalities:		no		yes		
	IF	YES: consid	er E)	(CLU	SION	N of patient
FECAL SAMPLES: Calprotectin □ no □ yes		not perfor	med			
If yes, significant abnormality:		no		yes		
	IF	YES: consid	er E)	(CLU	SION	N of patient
Elastase □ no □ yes		not perfor	med			
. If yes, significant abnormality:		-	_	yes		
			er F\	י	SION	l of natient

9. Clinical examination

IBS QUESTIONNAIRE

INSTRUCTIONS

This form is designed to enable us to record and monitor the severity of your IBS. It is to be expected that your symptoms might vary over time, so please try to answer the questions based on how you <u>currently</u> feel (i.e. over the last 10 days or so). All information will be kept in **strict** confidence.

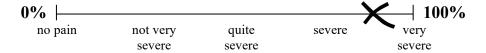
- 1. For questions where a number of different responses are a possibility please circle the response appropriate to you.
- 2. Some questions will require you to write in an appropriate response.
- 3. Some questions require you to put an x on a line which enables us to judge the severity of a particular problem.

For example:

How severe was your pain?

Please place your x (\times) anywhere on the line between 0-100% in order to indicate as accurately as possible the severity of your symptom.

This example shows a severity of approximately 90%.



PART 1: SEVERITY SCORE

<i>1</i> .	a)	Do you current	ly suffer from	abdominal	(tummy) pain?	125		for a
	<i>b)</i>	If yes, how seve	ere is your abdo	ominal (tur	nmy) pain?	T	· · · · · · · · · · · · · · · · · · ·	SCC
		0%				100%	0	
		no pain	not very severe	quite severe	severe	very severe		
	c)	Please enter the For example if you day enter 10.		-	_	•		
		Number of days	s with pain				x10	
2.	a) b)	Do you current (bloating, swoll (*women, please If yes, how seve	l en or tight tum ignore distensio	nmy) n related to	your periods)		NO copriate box	
	U)		re is your dode		J	100%	0	
		no distension	not very severe	quite severe	severe	very severe		
<i>3</i> .	Но	ow satisfied are yo	ou with your be	owel habit?	•			
		0%				100%	Ó	
		very happy	quite happy	1	unhappy	very unhappy		
4.		ease indicate with wel Syndrome is			-			
		0%				100%	Ó	
		not at all	not much		quite a lot	completely		



Brief Trauma Questionnaire (BTQ)

Version date: 1999

Reference: Schnurr, P., Vielhauer, M., Weathers, F., & Findler, M. (1999). *The Brief Trauma Questionnaire (BTQ)* [Measurement instrument]. Available from http://www.ptsd.va.gov

URL: http://www.ptsd.va.gov/professional/as-

sessment/te-

measures/brief_trauma_question-

naire_btq.asp



Brief Trauma Questionnaire

The BTQ is a brief self- report questionnaire that is derived from the Brief Trauma Interview (Schnurr et al., 1995). (Information about the reliability and validity of the BTI is provided in Schnurr et al., 2002). The BTQ was originally designed to assess traumatic exposure according to *DSM-IV* but specifically asked only about Criterion A.1 (life threat/serious injury) because of the difficulty of accurately assessing A.2 (subjective response) in a brief self- report format. Criterion A.2 has been eliminated from the PTSD diagnostic criteria in DSM- 5, so the BTQ provides a complete assessment of Criterion A.

The questionnaire may be used to determine whether an individual has had an event that meets the A Criterion, or to determine the different types of Criterion A events an individual has experienced. In either case, exposure to an event should be scored as positive if a respondent says yes to either:

- life threat or serious injury for events 1- 3 and 5- 7;
- life threat for event 4:
- serious injury for event 8, or;
- "Has this ever happened to you?" for events 9 and 10.

Information about the BTQ appears in the following articles:

- Koenen, K.C., De Vivo, I., Rich-Edwards, J., Smoller, J.W., Wright, R.J., & Purcell, S.M. (2009). Protocol for investigating genetic determinants of posttraumatic stress disorder in women from the Nurses' Health Study II. *BMC Psychiatry*, 9 (article 29).
- Kubzansky, L. D., Bordelois, P., Jun, H. J., Roberts, A. L., Cerda, M., Bluestong, N., & Koenen, K. C. (2014). The weight of traumatic stress: A prospective study of posttraumatic stress disorder symptoms and weight status in women. *JAMA Psychiatry*, 71, 44-51.
- Lancaster, S.L., Melka, S.E., & Rodriguez, B.F. (2009). A factor analytic comparison of five models of PTSD symptoms. *Journal of Anxiety Disorders*, 23, 269-274.
- Morgan, C.A., III, Doran, A.P., Steffians, G., Hazlett, G., Southwick, S. (2006). Stress- induced deficits in working memory and visuo- constructive abilities in special operations soldiers. *Biological Psychiatry*, 60, 722-729.
- Morgan, C.A., III, Hazlett, G., Wang, S., Richardson, E.G., Jr., Schnurr, P.P., & Southwick, S.M. (2001). Symptoms of dissociation in humans experiencing acute, uncontrollable stress: A prospective investigation. *American Journal of Psychiatry*, 158, 1239-1247.
- Morgan, C.A., III, Rasmusson, A.M., Winters, B., Hauger, R.L., Morgan, J., Hazlett, G., & Southwick, S.M. (2006). Trauma exposure rather than posttraumatic stress disorder is associated with reduced baseline plasma neuropeptide- Y levels. *Biological Psychiatry*, *54*, 1087-1091.
- Schnurr, P.P., Spiro, A. III, Vielhauer, M.J., Findler, M.N., & Hamblen, J.L. (2002). Trauma in the lives of older men: Findings from the Normative Aging Study. *Journal of Clinical Geropsychology*, 8, 175-187.
- Whealin, J.M., Batzer, W.B., Morgan, C.A. III, Schnurr, P.P., & Friedman, M.J. (2007). Cohesion, burnout, and past trauma in Tri- Service medical and support personnel. *Military Medicine*, 172, 266-272.

Brief Trauma Questionnaire

The following questions ask about events that may be extraordinarily stressful or disturbing for almost everyone. Please circle "Yes" or "No" to report what has happened to you.

If you answer "Yes" for an event, please answer any additional questions that are listed on the right side of the page to report: (1) whether you thought your life was in danger or you might be seriously injured; and (2) whether you were seriously injured.

If you answer "No" for an event, go on to the next event.

Event	Has this ever happened to you?	If the event happened, did you think your life was in danger or you might be seriously injured?	If the event happened, were you seriously injured?
Have you ever served in a war zone, or have you ever served in a noncombat job that exposed you to war-related casualties (for example, as a medic or on graves registration duty?)	No Yes	No Yes	No Yes
Have you ever been in a serious car accident, or a serious accident at work or somewhere else?	No Yes	No Yes	No Yes
3. Have you ever been in a major natural or technological disaster, such as a fire, tornado, hurricane, flood, earthquake, orchemical spill?	No Yes	No Yes	No Yes
4. Have you ever had a life-threatening illness such as cancer, a heart attack, leukemia, AIDS, multiple sclerosis, etc.?	No Yes	No Yes	N/A
5. Before age 18, were you ever physically punished or beaten by a parent, caretaker, or teacher so that: you were very frightened; or you thought you would be injured; or you received bruises, cuts, welts, lumps or other injuries?	No Yes	No Yes	No Yes
6. Not including any punishments or beatings you already reported in Question 5, have you ever been attacked, beaten, or mugged by anyone, including friends, family members or strangers?	No Yes	No Yes	No Yes
7. Has anyone ever made or pressured you into having some type of unwanted sexual contact? Note: By sexual contact we mean any contact between someone else and your private parts or between you and some else's private parts	No Yes	No Yes	No Yes
8. Have you ever been in any other situation in which you were seriously injured, or have you ever been in any other situation in which you feared you might be seriously injured or killed?	No Yes	N/A	No Yes
9. Has a close family member or friend died violently, for example, in a serious car crash, mugging, or attack?	No Yes	N/A	No Yes
10. Have you ever witnessed a situation in which someone was seriously injured or killed, or have you ever witnessed a situation in which you feared someone would be seriously injured or killed? Note: Do not answer "yes" for any event you already reported in Questions 1-9	No Yes	N/A	N/A

GAD-7

Over the <u>last 2 weeks</u> , how often have you been bothered by the following problems?	Not at all	Several days	More than half the days	Nearly every day
(Use "✔" to indicate your answer)				
Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Having trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid, as if something awful might happen	0	1	2	3

(For office coding: Total Score T____ = ___ + ____)

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MFI® MULTIDIMENSIONAL FATIGUE INVENTORY ® E. Smets, B. Garssen, B. Bonke (2013).

Insti	ructions:							
By means of the following statements we would like to get an idea of how you have been feeling lately. There is, for example, the statement: "I FEEL RELAXED" If you think that this is entirely true, that indeed you have been feeling relaxed lately, please, place an X in the extreme left box; like this: yes, that is true \(\subseteq 1 \) \(\subseteq 2 \) \(\subseteq 3 \) \(\subseteq 4 \) foo, that is not true								
	more you disagree with the statement, the Please do not miss out a statement and p	•						of "no, that is not
1	I feel fit.	yes, that is true	□ 1	□ 2	□3	□4	□ 5	no, that is not true
2	Physically, I feel only able to do a little.	yes, that is true	1	_ 2	3	4	□ 5	no, that is not true
3	I feel very active.	yes, that is true	1	_ 2	3	4	□ 5	no, that is not true
4	I feel like doing all sorts of nice things.	yes, that is true	1	1 2	3	4	□ 5	no, that is not true
5	I feel tired.	yes, that is true	1	 2	□3	4	□ 5	no, that is not true
6	I think I do a lot in a day.	yes, that is true	1	 2	□3	4	□ 5	no, that is not true
7	When I am doing something, I can keep my thoughts on it.	yes, that is true	□ 1	□ 2	□3	□4	□ 5	no, that is not true
8	Physically I can take on a lot.	yes, that is true	1	_ 2	3	4	□ 5	no, that is not true
9	I dread having to do things.	yes, that is true	\Box_1	_ 2	□3	□4	□ 5	no, that is not true
10	I think I do very little in a day.	yes, that is true	\Box_1	_ 2	□3	□4	□ 5	no, that is not true
11	I can concentrate well.	yes, that is true	1	_ 2	□3	□4	□ 5	no, that is not true
12	I am rested.	yes, that is true	1	_ 2	□3	4	□ 5	no, that is not true
13	It takes a lot of effort to concentrate on things.	yes, that is true	1	□2	□3	□4	□5	no, that is not true
14	Physically I feel I am in a bad condition.	yes, that is true	1	_ 2	□3	4	□ 5	no, that is not true
15	I have a lot of plans.	yes, that is true	1	_ 2	□3	4	□ 5	no, that is not true
16	I tire easily.	yes, that is true	1	_ 2	□3	□4	□ 5	no, that is not true
17	I get little done.	yes, that is true	1	□ 2	□3	□4	□ 5	no, that is not true
18	I don't feel like doing anything.	yes, that is true	1	□2	□3	4	□ 5	no, that is not true
19	My thoughts easily wander.	yes, that is true	\Box_1	_ 2	□3	4	□ 5	no, that is not true
20	Physically I feel I am in an excellent	yes, that is true	□1	 2	□ 3	□4	□5	no, that is not true

condition.

PHYSICAL SYMPTOMS (PHQ-15)

During the past 4 weeks, how much have you been bothered by any of the following problems?

		Not bothered at all (0)	Bothered a little (1)	Bothered a lot (2)
a.	Stomach pain			
b.	Back pain			
c.	Pain in your arms, legs, or joints (knees, hips, etc.)			
	Menstrual cramps or other problems with your periods OMEN ONLY			
e.	Headaches			
f.	Chest pain			
g.	Dizziness			
h.	Fainting spells			
i.	Feeling your heart pound or race			
j.	Shortness of breath			
k.	Pain or problems during sexual intercourse			
I.	Constipation, loose bowels, or diarrhea			
m.	Nausea, gas, or indigestion			
n.	Feeling tired or having low energy			
о.	Trouble sleeping			
	(For office coding: Total	Score T		. \

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PATIENT HEALTH QUESTIONNAIRE-9 (PHQ-9)

Over the <u>last 2 weeks</u> , how often by any of the following problem (Use "✔" to indicate your answer	าร?	Not at all	Several days	More than half the days	Nearly every day
Little interest or pleasure in doi	ng things	0	1	2	3
2. Feeling down, depressed, or he	opeless	0	1	2	3
3. Trouble falling or staying aslee	p, or sleeping too much	0	1	2	3
4. Feeling tired or having little end	ergy	0	1	2	3
5. Poor appetite or overeating		0	1	2	3
Feeling bad about yourself — chave let yourself or your family		0	1	2	3
7. Trouble concentrating on thing newspaper or watching television		0	1	2	3
Moving or speaking so slowly t noticed. Or the opposite — bei you have been moving around	ng so fidgety or restless that	0	1	2	3
Thoughts that you would be be yourself in some way	tter off dead or of hurting	0	1	2	3
	For office cod	DING <u>0</u> +	· +	٠ ٠	·
			=	Total Score:	
If you ticked <u>any</u> problems, how take care of things at home, or			for you to	o do your v	vork,
Not difficult at all □	Somewhat difficult d □	Very difficult □		Extreme difficul	

The Revised Fibromyalgia Impact Questionnaire	
Domain 1 directions: For each of the following nine questions, check the to do each of the following activities over the past $7\mathrm{days}$:	one box that best indicates how much your fibromyalgia made it difficult
Brush or comb your hair	No difficulty
Walk continuously for 20 minutes	No difficulty Output Description:
Prepare a homemade meal	No difficulty
Vacuum, scrub, or sweep floors	No difficulty
Lift and carry a bag full of groceries	No difficulty Output Description:
Climb one flight of stairs	No difficulty
Change bed sheets	No difficulty
Sit in a chair for 45 minutes	No difficulty Output Description:
Go shopping for groceries	No difficulty Output Description:
Domain 2 directions: For each of the following two questions, check the the past 7 days: Fibromyalgia prevented me from accomplishing goals for the week I was completely overwhelmed by my fibromyalgia symptoms Domain 3 directions: For each of the following 10 questions, check the goals.	Never
over the past 7 days:	
Please rate your level of pain	No pain 🗆 🗆 🗆 🗆 🗆 🗆 Unbearable pain
Please rate your level of energy	Lots of energy
Please rate your level of stiffness	No stiffness
Please rate the quality of your sleep	Awoke rested
Please rate your level of depression	No depression DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD
Please rate your level of memory problems	Good memory
Please rate your level of anxiety	Not anxious
Please rate your level of tenderness to touch	No tenderness Output Description: Output Description:
Please rate your level of balance problems	No imbalance
Please rate your level of sensitivity to loud noises, bright lights, odors, and cold	No sensitivity

Scoring: Step 1. Sum the scores for each of the three domains (function, overall, and symptoms). Step 2. Divide domain 1 score by three, divide domain 2 score by one (that is, it is unchanged), and divide domain score 3 by two. Step 3. Add the three resulting domain scores to obtain the total Revised Fibromyalgia Impact Questionnaire score.

Table 1. Baseline Recruitment

Full Cross Sectional Study	VHIR	KUL	UGOT	UNIBO	UM	UMF	GUF	RUMS	SU	Total target	Target reached as of 31.01.2023	Percentage
IBS alone	34	34	34	34	34	34				204	263	129%
IBS comorbid	34	34	34	34	34	34				204	211	103%
IBS Multicomorbid	34	34	34	34	34	34				204	114	56%
Mental	13						13	13	13	52	54	104%
Somatic	13						13	13	13	52	48	92 %
Somatic+mental	13						13	13	13	52	52	100%
Healthy control	17	17	17							51	69	135%
Total	158	119	119	102	102	102	39	3 9	39	800	811	101%
Longitudinal Study	VHIR	KUL	UGOT	UNIBO	UM	UMF	GUF	RUMS	SU	Total target	Target reached as of 30.12.2022	Percentage
IBS alone	17	17	17	17	17	17				102	164	161%
IBS comorbid (IBS +MENTAL)	9	9	9	8	8	8				51	104	204%
IBS comorbid (IBS +SOMATIC)	8	8	8	9	9	9				51	23	45%
IBS Multicomorbid	17	17	17	17	17	17				102	77	75%
Mental	13						13	13	13	52	41	79%
Somatic	13						13	13	13	52	46	88%
Somatic+mental	13						13	13	13	52	46	88%
Healthy control	17	17	17							51	67	131%
Total	107	68	68	51	51	51	39	39	39	500	568	114%
Only Cross-sectional Study	VHIR	KUL	UGOT	UNIBO	UM	UMF	GUF	RUMS	SU	Total target	Target reached as of 30.12.2022	Percentage
IBS alone	17	17	17	17	17	17				102	99	97%
IBS comorbid (IBS +MENTAL)	9	9	9	8	8	8				51	65	127%
IBS comorbid (IBS +SOMATIC)	8	8	8	9	9	9				51	19	37%
IBS Multicomorbid	17	17	17	17	17	17				102	37	36%
Mental										0	13	
Somatic										0	2	
Somatic+mental										0	6	
Healthy control										0	2	

Figure 2. Recruitment – cross-sectional assessment only.

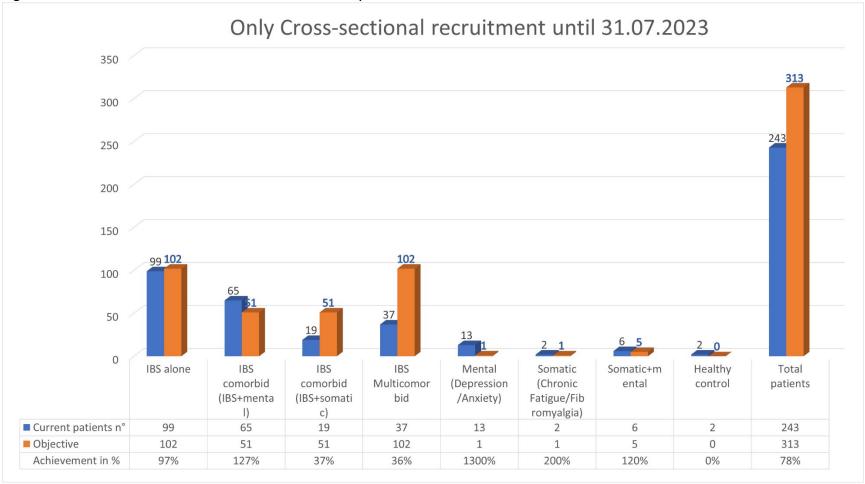


Figure 3. Recruitment planned longitudinal follow-up.

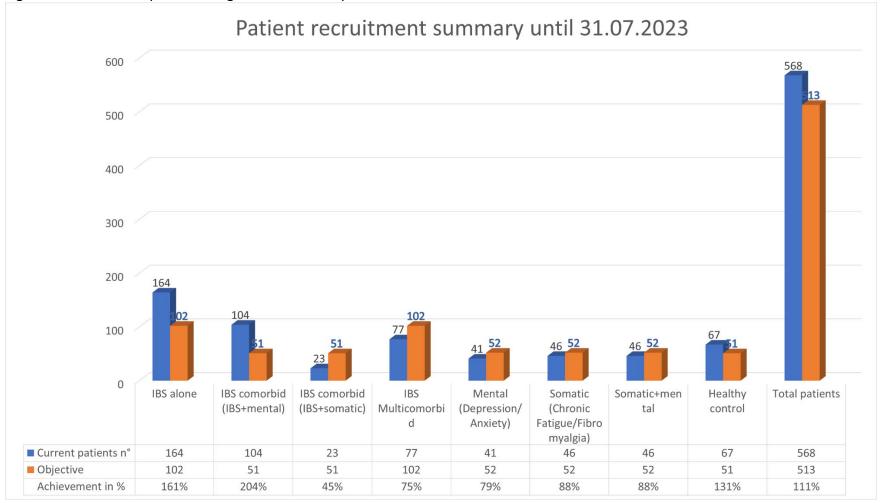


Table 2. DE	MOGRAPHIC DA	TA																	
			sample 867)*		alone 272)	como	3S orbid- ntal 168)	como som (n =	orbid- natic	com	nulti- orbid 123)	con	lthy trols : 78)	me	trol – ntal : 60)	som	trol – natic : 51)	me +son	ntrol ental matic = 53)
		М	SD	М	SD	М	SD	М	SD	М	SD	М	SD	М	SD	М	SD	М	SD
Age		44.22	15.09	45.13	16.14	41.29	14.64	48.13	14.02	45.20	11.82	35.51	12.97	51.61	13.33	51.61	13.33	49.74	14.34
BMI		19.2	14.3	21.5	17.5	20.1	10.5	20.7	11.6	19.5	12.4	11.5	12.1	16.6	13.7	15.2	15.4	21.1	13
		n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
	Woman	657	75.8	202	74.3	140	83.3	41	85.4	107	87.0	45	57.7	38	63.3	40	78.4	36	67.9
Gender	Man	207	23.9	70	25.7	28	16.7	7	14.6	16	13.0	33	42.3	22	36.7	11	21.6	17	32.1
	Missing	3	.3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	No	668	77	203	74.6	116	69.0	42	87.5	103	83.7	63	80.8	48	80.0	44	86.3	44	83.0
Born by	Yes	109	12.9	32	11.8	30	17.9	4	8.3	11	8.9	9	11.5	10	16.7	6	11.8	7	13.2
cesarian	Not known	20	2.3	6	2.2	4	2.4	1	2.1	3	2.4	72	92.3	2	3.3	1	2.0	2	3.8
	Missing	70	8.1	31	11.4	18	10.7	1	2.1	6	4.9	6	7.7	0	0	0	0	0	0
	No	215	24.8	66	24.3	43	25.6	19	39.6	32	26.0	23	29.5	10	16.7	13	25.5	9	17.0
Breastfed	Yes	466	53.7	132	48.5	78	46.4	23	47.9	69	56.1	45	57.7	47	78.3	32	62.7	36	67.9
Dicastica	Not known	116	13.4	43	15.8	29	17.3	5	10.4	16	13.0	4	5.1	3	5.0	6	11.8	8	15.1
	Missing	70	8.1	31	11.4	18	10.7	1	2.1	6	4.9	6	7.7	0	0	0	0	0	0
	No University degree	469	54.1	132	48.5	89	53.0	36	75.0	87	70.7	29	37.2	28	46.7	32	62.7	32	60.4
Education	University degree	313	36.1	101	37.1	59	35.1	9	18.8	30	24.4	42	53.8	31	51.7	18	35.3	21	39.6
	Doctoral studies (PhD)	15	1.7	8	2.9	2	1.2	2	4.2	0	0	2	2.6	0	0	1	2.0	0	0
	Missing	70	8.1	31	11.4	18	10.7	1	2.1	6	4.9	5	6.4	1	1.7	0	0	0	0
	Full time	373	43.0	136	50.0	87	51.8	9	18.8	40	32.5	38	48.7	28	46.7	17	33.3	14	26.4
Work	Part-time	96	11.1	27	9.9	16	9.5	11	22.9	17	13.8	8	10.3	5	8.3	9	17.6	3	5.7
WOIR	Retired	68	7.8	29	10.7	6	3.6	3	6.3	4	3.3	0	0	9	15.0	7	13.7	9	17.0
	Student	95	11.0	30	11.0	22	13.1	3	6.3	10	8.1	18	23.1	6	10.0	2	3.9	4	7.5

	Unable to work (> 1 month, < 1 year)	39	4.5	4	1.5	5	3.0	8	16.7	14	11.4	0	0	2	3.3	4	7.8	2	3.8
	Unable to work (> 1 year)	89	10.3	7	2.6	9	5.4	12	25.0	29	23.6	0	0	3	5.0	11	21.6	17	32.1
	Unemployed (not due to health problem)	31	3.6	7	2.6	3	1.8	0	0	2	1.6	8	10.3	6	10.0	1	2.0	4	7.5
	Full time home maker	5	.6	1	.4	2	1.2	1	2.1	1	.8	0	0	0	0	0	0	0	0
	Missing	71	8.2	31	11.4	18	10.7	1	2.1	6	4.9	6	7.7	1	1.7	0	0	0	0
	Primary care	24	2.8	7	2.6	0	0	0	0	0	0	0	0	7	11.7	4	7.8	6	11.3
	Secondary care	368	42.4	88	32.4	71	42.3	21	43.8	62	50.4	12	15.4	34	56.7	34	66.7	12	22.6
Recruitmen	Tertiary care	111	12.8	99	36.4	15	8.9	13	27.1	19	15.4	1	1.3	10	16.7	0	0	32	60.4
t from	Public											61	78.2						
	advertisemen t	298	34.4	48	17.6	64	38.1	13	27.1	36	29.3			9	15.0	13	25.5	3	5.7
	Missing	66	7.6	30	11.0	18	10.7	1	2.1	6	4.9	4	5.1	0	0	0	0	0	0

^{*}Missing study group allocation: n = 14

			groups 611)		llone 272)	me	morbid- ental : 168)	som	norbid- natic : 48)		nulti- orbid 123)
		М	SD	М	SD	M	SD	M	SD	M	SD
Time since onset of IBS syn	nptoms (months)	186.48	163.65	183.47	165.24	187.7	157.19	183.46	179.32	194.82	164.93
		n	%	n	%	n	%	n	%	n	%
	Never	4	0.5	3	1.1	1	0.6	0	0	0	0
	Less than 1 day/week	25	2.9	16	5.9	7	4.2	1	2.1	1	0.8
	1-2 days/week	126	14.5	67	24.6	33	19.6	7	14.6	18	14.6
Frequency of symptoms	At least 3 times/week	70	8.1	26	9.6	15	8.9	11	22.9	17	13.8
rrequency or symptoms	≥ 3 days/week	107	12.3	52	19.1	29	17.3	5	10.4	20	16.3
	Everyday	187	21.6	67	24.6	50	29.8	21	43.8	49	39.8
	Unknown	8	0.9	2	0.7	3	1.8	1	2.1	2	1.6
	Missing	340	39.2	39	14.3	30	17.9	2	4.2	16	13.0
	Acutely	128	14.8	50	18.4	43	25.6	10	20.8	24	19.5
Cumptoms started	Gradually	357	41.2	167	61.4	84	50.0	34	70.8	70	56.9
Symptoms started	Unknown	43	5.0	16	5.9	12	7.1	2	4.2	13	10.6
	Missing	339	39.1	39	14.3	29	17.3	2	4.2	16	13.0
	Abdominal surgery	11	1.3	7	2.6	1	0.6	1	2.1	2	1.6
	Antibiotics	15	1.7	9	3.3	1	0.6	2	4.2	3	2.4
	Change of diet	12	1.4	7	2.6	4	2.4	0	0	1	0.8
	Gastrointestinal infection	49	5.7	23	8.5	14	8.3	6	12.5	6	4.9
Onset of symptoms	Not clear	285	32.9	130	47.8	71	42.3	23	47.9	58	47.2
Onset of symptoms	Other	55	6.3	24	8.8	10	6.0	9	18.8	12	9.8
	Other infection	8	0.9	4	1.5	1	0.6	1	2.1	2	1.6
	Stressful life event/ psychological trauma	93	10.7	29	10.7	37	22.0	4	8.3	23	18.7
	Missing	339	39.1	39	14.3	29	17.3	2	4.2	16	13.0

Previously visited primary	No	448	51.7	87	32.0	55	32.7	17	35.4	40	32.5
care physician for their	Yes	411	47.4	182	66.9	113	67.3	31	64.6	83	67.5
problem	Missing	8	0.9	3	1.1	0	0	0	0	0	0
Previously visited	No	473	54.6	111	40.8	65	38.7	18	37.5	30	24.4
secondary care physician	Yes	386	44.5	158	58.1	103	61.3	30	62.5	93	75.6
for their problem	Missing	8	0.9	3	1.1	0	0	0	0	0	0
Previously visited tertiary	No	796	91.8	244	89.7	151	89.9	42	87.5	109	88.6
care physician for their	Yes	63	7.3	25	9.2	17	10.1	6	12.5	14	11.4
problem	Missing	8	0.9	3	1.1	0	0	0	0	0	0

^{*}Missing study group allocation: n = 14

Table 4. DIETA	RY HISTORY																		
		Total sa (N = 8	•		alone 272)	como me	3S orbid- ntal 168)	como	3S orbid- natic : 48)	com	nulti- orbid 123)	con	ilthy trols : 78)	me	trol – ntal = 60)	som	trol – natic : 51)	me +son	ntrol ntal matic = 53)
		n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Gluten-free	No	773	89.2	245	90.1	151	89.9	39	81.3	106	86.2	67	85.9	56	93.3	49	96.1	49	92.5
diet	Yes	85	9.8	27	9.9	17	10.1	9	18.8	17	13.8	5	6.4	4	6.7	2	3.9	4	7.5
	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
Vegetarian	No	817	94.2	264	97.1	153	91.1	46	95.8	120	97.6	67	85.9	55	91.7	51	100	51	96.2
diet	Yes	41	4.7	8	2.9	15	8.9	2	4.2	3	2.4	5	6.4	5	8.3	0	0	2	3.8
	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
	No	842	97.1	268	98.5	163	97.0	47	97.9	122	99.2	70	89.7	59	98.3	51	100	51	96.2
Vegan diet	Yes	16	1.8	4	1.5	5	3.0	1	2.1	1	0.8	2	2.6	1	1.7	0	0	2	3.8
	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
Lactose-free	No	694	80.0	219	80.5	131	78.0	34	70.8	85	69.1	69	88.5	50	83.3	45	88.2	50	94.3
diet	Yes	164	18.9	53	19.5	37	22.0	14	29.2	38	30.9	3	3.8	10	16.7	6	11.8	3	5.7
	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
Low	No	845	97.5	268	98.5	166	98.8	47	97.9	123	100.0	72	92.3	58	96.7	48	94.1	52	98.1
carbohydrate	Yes	13	1.5	4	1.5	2	1.2	1	2.1	0	0	0	0	2	3.3	3	5.9	1	1.9
/ high fat diet	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
High/rich	No	834	96.2	268	98.5	166	98.8	46	95.8	123	100.0	71	91.0	54	90.0	47	92.2	48	90.6
fiber diet	Yes	24	2.8	4	1.5	2	1.2	2	4.2	0	0	1	1.3	6	10.0	4	7.8	5	9.4
	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
	No	792	91.3	243	89.3	156	92.9	41	85.4	108	87.8	72	92.3	59	98.3	49	96.1	53	100
FODMAP diet	Yes	66	7.6	29	10.7	12	7.1	7	14.6	15	12.2	0	0	1	1.7	2	3.9	0	0
	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
Any other	No	792	91.3	257	94.5	155	92.3	40	83.3	117	95.1	68	87.2	53	88.3	45	88.2	46	86.8
special diet	Yes	66	7.6	15	5.5	13	7.7	8	16.7	6	4.9	4	5.1	7	11.7	6	11.8	7	13.2
	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
	No	373	43.0	125	46.0	91	54.2	24	50.0	55	44.7	16	20.5	24	40	13	25.5	19	35.8

No special	Yes	485	55.9	147	54.0	77	45.8	24	50.0	68	55.3	56	71.8	36	60.0	38	74.5	34	64.2
diet	Missing	9	1.0	0	0	0	0	0	0	0	0	6	7.7	0	0	0	0	0	0
Restrictions	No	241	27.8	115	42.3	68	40.5	18	37.5	37	30.1	-	-	-	-	-	-	-	-
due to IBS	Yes	292	33.7	113	41.5	73	43.5	28	58.3	76	61.8	1	-	-	-	-	-	1	-
symptoms	Missing	334	38.5	44	16.2	27	16.1	2	4.2	10	8.1	-	-	-	-	-	-	-	-
Avoidance of	No	290	33.4	79	29.0	43	25.6	10	20.8	11	8.9	48	61.5	36	60.0	27	52.9	32	60.4
certain food	Yes	499	57.6	158	58.1	105	62.5	37	77.1	105	85.4	23	29.5	24	40.0	24	47.1	21	39.6
products	Missing	78	9.0	35	12.9	20	11.9	1	2.1	7	5.7	7	9.0	0	0	0	0	0	0
Avoidance of	No	44	5.1	16	5.9	12	7.1	4	8.3	12	9.8	-	-	-	-	-	-	1	-
certain food	Yes	349	40.3	136	50.0	89	53.0	32	66.7	90	73.2	-	-	-	-	-	-	1	-
products is helpful	Missing	474	54.7	120	44.1	67	39.9	12	25.0	21	17.1	1	-	-	-	-	-	1	-
Use of	No	636	73.4	188	69.1	115	68.5	33	68.8	82	66.7	67	85.9	57	95.0	45	88.2	44	83.0
pre/probiotic s in last 3	Yes	151	17.4	48	17.6	32	19.0	14	29.2	34	27.6	5	6.4	3	5.0	6	11.8	9	17.0
months	Missing	80	9.2	36	13.2	21	12.5	1	2.1	7	5.7	6	7.7	0	0	0	0	0	0
		M	SD	M	SD	М	SD	М	SD	M	SD								
Total duration use (days)	of probiotics	163.6	435.9	260.9	603	37.1	34.5	61**	-	58.3	45.1	41**	-	1518 **	-	16**	-	27.67	18.9

^{*}Missing study group allocation: n = 14 ** only 1 case

Table 5. PERSON	AL HISTORY																		
		Total sa (N = 8	•		alone 272)	como me	3S orbid- ntal 168)	com	BS orbid- natic = 48)	com	nulti- orbid 123)	con	ilthy trols : 78)	me	trol – ntal = 60)	som	rol – natic : 51)	me +sor	ntrol ntal natic : 53)
		n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
	No	692	79.8	211	77.6	133	79.2	41	85.4	101	82.1	64	82.1	53	88.3	40	78.4	45	84.9
Appendectomy	Yes	99	11.4	26	9.6	15	8.9	6	12.5	15	12.2	8	10.3	7	11.7	11	21.6	8	15.1
	Missing	76	8.8	35	12.9	20	11.9	1	2.1	7	5.7	6	7.7	0	0	0	0	0	0
	No	763	88.0	229	84.2	145	86.3	45	93.8	107	87.0	71	91.0	60	100.0	48	94.1	51	96.2
Cholecystectomy	Yes	29	3.3	9	3.3	3	1.8	2	4.2	9	7.3	1	1.3	0	0	3	5.9	2	3.8
	Missing	75	8.7	34	12.5	20	11.9	1	2.1	7	5.7	6	7.7	0	0	0	0	0	0
	No	640	73.8	188	69.1	132	78.6	41	85.4	103	83.7	49	62.8	44	73.3	37	72.5	40	75.5
Hysterectomy	Yes	34	3.9	10	3.7	4	2.4	2	4.2	5	4.1	1	1.3	2	3.3	7	13.7	3	5.7
пузіегесіопту	N/A	118	13.6	40	14.7	12	7.1	4	8.3	8	6.5	22	28.2	14	23.3	7	13.7	10	18.9
	Missing	75	8.7	34	12.5	20	11.9	1	2.1	7	5.7	6	7.7	0	0	0	0	0	0
Other abdominal	No	659	76.0	198	72.8	125	74.4	38	79.2	87	70.7	69	88.5	47	78.3	45	88.2	45	84.9
	Yes	134	15.5	40	14.7	23	13.7	9	18.8	29	23.6	4	5.1	13	21.7	6	11.8	8	15.1
surgery	Missing	74	8.5	34	12.5	20	11.9	1	2.1	7	5.7	5	6.4	0	0	0	0	0	0
	No	488	56.3	224	82.4	48	28.6	46	95.8	26	21.1	73	93.6	16	26.7	45	88.2	8	15.1
Anxiety	Yes	305	35.2	14	5.1	102	60.7	1	2.1	89	72.4	0	0	44	73.3	6	11.8	45	84.9
	Missing	74	8.5	34	12.5	18	10.7	1	2.1	8	6.5	5	6.4	0	0	0	0	0	0
	No	477	55.0	223	82.0	55	32.7	41	85.4	23	18.7	74	94.9	8	13.3	41	80.4	8	15.1
Depression	Yes	317	36.6	15	5.5	95	56.5	6	12.5	92	74.8	0	0	52	86.7	10	19.6	45	84.9
	Missing	73	8.4	34	12.5	18	10.7	1	2.1	8	6.5	0	0	0	0	0	0	0	0
Other mental	No	709	81.8	223	82.0	127	75.6	44	91.7	90	73.2	74	94.9	50	83.3	48	94.1	47	88.7
disorder	Yes	85	9.8	16	5.9	22	13.1	3	6.3	25	20.3	0	0	10	16.7	3	5.9	6	11.3
alsoluci	Missing	73	8.4	33	12.1	19	11.3	1	2.1	8	6.5	0	0	0	0	0	0	0	0
Other relevant	No	567	65.4	160	58.8	100	59.5	33	68.8	74	60.2	72	92.3	50	83.3	36	70.6	37	69.8
disease	Yes	229	26.4	79	29.0	50	29.8	14	29.2	41	33.3	2	2.6	10	16.7	15	29.4	16	30.2
discase	Missing	71	8.2	33	12.1	18	10.7	1	2.1	8	6.5	4	5.1	0	0	0	0	0	0

History of	No	615	70.9	235	86.4	145	86.3	19	39.6	51	41.5	73	93.6	60	100	13	25.5	13	24.5
History of fibromylagia	Yes	178	20.5	3	1.1	4	2.4	28	58.3	64	52.0	1	1.3	0	0	38	74.5	40	75.5
libiolilylagia	Missing	74	8.5	34	12.5	19	11.3	1	2.1	8	6.5	4	5.1	0	0	0	0	0	0
History of chronic	No	612	70.6	237	87.1	147	87.5	14	29.2	30	24.4	73	93.6	56	93.3	27	52.9	22	41.5
fatigue	Yes	180	20.8	1	0.4	2	1.2	33	68.8	84	68.3	1	1.3	4	6.7	24	47.1	31	58.5
latigue	Missing	75	8.7	34	12.5	19	11.3	1	2.1	9	7.3	4	5.1	0	0	0	0	0	0
	No	602	69.4	237	87.1	112	66.7	38	79.2	67	54.5	63	80.8	51	85	41	80.4	37	69.8
Skin allergy	Yes	183	21.1	1	0.4	33	19.6	9	18.8	47	38.2	9	11.5	9	15	10	19.6	16	30.2
	Missing	82	9.5	34	12.5	23	13.7	1	2.1	9	7.3	6	7.7	0	0	0	0	0	0
	No	644	74.3	203	74.6	120	71.4	34	70.8	83	67.5	68	87.2	48	80.0	40	78.4	41	77.4
Food allergy	Yes	141	16.3	32	11.8	26	15.5	13	27.1	31	25.2	4	5.1	12	20.0	11	21.6	12	22.6
	Missing	82	9.5	37	13.6	22	13.1	1	2.1	9	7.3	6	7.7	0	0	0	0	0	0
Eyes/nose/throat	No	507	58.5	159	58.5	94	56	27	56.3	54	43.9	54	69.2	45	75	33	64.7	35	66
allergy	Yes	276	31.8	76	27.9	51	30.4	20	41.7	59	48	18	23.1	15	25	18	35.3	18	34
anergy	Missing	84	9.7	37	13.6	23	13.7	1	2.1	10	8.1	6	7.7	0	0	0	0	0	0
	No	439	50.6	141	51.8	74	44.0	27	56.3	66	53.7	31	39.7	39	65	29	56.9	28	52.8
History of COVID	Yes	296	34.1	86	31.6	63	37.5	19	39.6	42	34.1	38	48.7	13	21.7	14	27.5	19	35.8
Thistory of COVID	Not known	53	6.1	11	4	11	6.5	1	2.1	6	4.9	3	3.8	7	11.7	8	15.7	6	11.3
	Missing	79	9.1	34	12.5	20	11.9	1	2.1	9	7.3	6	7.7	1	1.7	0	0	0	0

^{*}Missing study group allocation: n = 14

Table 6. FAMILY I	HISTORY																		
		Total s (N = 8	•		alone 272)	come me	3S orbid- ntal 168)	com	BS orbid- natic = 48)	com	nulti- orbid 123)	con	althy trols = 78)	me	trol – ntal = 60)		rol – natic : 51)	me +son	ntrol ntal natic : 53)
		n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
	No	313	36.1	141	51.8	77	45.8	29	60.4	62	50.4	0	0	-	-	-	-	-	-
Family history of	Yes	158	18.2	57	21.0	46	27.4	14	29.2	40	32.5	1	1.3	-	-	-	-	-	-
IBS	Not known	59	6.8	29	10.7	17	10.1	3	6.3	10	8.1	0	0	-	-	-	-	-	-
	Missing	337	38.9	45	16.5	28	16.7	2	4.2	11	8.9	77	98.7	•	-	-	-	-	-
First dagraa	No	724	83.5	220	80.9	129	76.8	36	75.0	88	71.5	74	94.9	-	-	-	-	-	-
First degree relative	Yes	139	16.0	52	19.1	39	23.2	12	25.0	35	28.5	1	1.3	-	-	-	-	-	-
relative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
Second degree	No	823	94.9	258	94.9	155	92.3	45	93.8	113	91.9	75	96.2	-	-	-	-	-	-
relative	Yes	40	4.6	14	5.1	13	7.7	3	6.3	10	8.1	0	0	-	-	-	-	-	-
relative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
Family history of	No	222	25.6	102	37.5	55	32.7	21	43.8	40	32.5	1	1.3	-	-	-	-	-	-
chronic	Yes	285	32.9	115	42.3	77	45.8	24	50.0	68	55.3	0	0	-	-	-	-	-	-
abdominal	Not known	22	2.5	10	3.7	8	4.8	1	2.1	3	2.4	0	0	-	-	-	-	-	-
symptoms	Missing	338	39.0	45	16.5	28	16.7	2	4.2	12	9.8	77	98.7	-	-	-	-	-	-
First dograp	No	610	70.4	170	62.5	96	57.1	29	60.4	64	52.0	75	96.2	-	-	-	-	-	-
First degree relative	Yes	253	29.2	102	37.5	72	42.9	19	39.6	59	48.0	0	0	•	-	-	-	-	-
relative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	•	-	-	-	-	-
Second degree	No	780	90.0	247	90.8	147	87.5	36	75.0	98	79.7	75	96.2	-	-	-	-	-	-
relative	Yes	83	9.6	25	9.2	21	12.5	12	25.0	25	20.3	0	0	-	-	-	-	-	-
Telative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
	No	702	81.0	214	78.7	127	75.6	44	91.7	95	77.2	71	91.0	55	91.7	49	96.1	43	81.1
Family history of	Yes	49	5.7	12	4.4	14	8.3	2	4.2	13	10.6	1	1.3	1	1.7	1	2.0	4	7.5
Crohn's Disease	Not known	35	4.0	11	4.0	6	3.6	1	2.1	7	5.7	0	0	3	5.0	1	2.0	6	11.3
	Missing	81	9.3	35	12.9	21	12.5	1	2.1	8	6.5	6	7.7	1	1.7	0	0	0	0
	No	838	96.7	268	98.5	160	95.2	46	95.8	119	96.7	74	94.9	59	98.3	51	100	50	94.3

First degree	Yes	24	2.8	4	1.5	8	4.8	2	4.2	4	3.3	1	1.3	1	1.7	0	0	3	5.7
relative	Missing	5	0.6	0	0	0	0	0	0	0	0	3	3.8	0	0	0	0	0	0
	No	836	96.4	264	97.1	161	95.8	48	100.0	114	92.7	75	96.2	60	100	50	98.0	52	98.1
Second degree	Yes	26	3.0	8	2.9	7	4.2	0	0	9	7.3	0	0	0	0	1	2.0	1	1.9
relative	Missing	5	0.6	0	0	0	0		00	0	0	3	3.8	0	0	0	0	0	0
	No	716	82.6	220	80.9	134	79.8	46	95.8	99	80.5	66	84.6	53	88.3	49	96.1	44	83.0
Family history of	Yes	23	2.7	6	2.2	6	3.6	0	0	7	5.7	3	3.8	0	0	0	0	1	1.9
Ulcerative Colitis	Not known	47	5.4	11	4.0	7	4.2	1	2.1	9	7.3	3	3.8	6	10.0	2	3.9	8	15.1
	Missing	81	9.3	35	12.9	21	12.5	1	2.1	8	6.5	6	7.7	1	1.7	0	0	0	0
First degree	No	844	97.3	268	98.5	162	96.4	48	100.0	119	96.7	72	92.3	60	100	51	100	52	98.1
relative	Yes	18	2.1	4	1.5	6	3.6	0	0	4	3.3	3	3.8	0	0	0	0	1	1.9
Telative	Missing	5	0.6	0	0	0	0	0	0	0	0	3	3.8	0	0	0	0	0	0
Second degree	No	855	98.6	270	99.3	166	98.8	48	100.0	120	97.6	75	96.2	60	100	51	100	0	0
relative	Yes	7	0.8	2	0.7	2	1.2	0	0	3	2.4	0	0	0	0	0	0	0	0
Telative	Missing	5	0.6	0	0	0	0	0	0	0	0	3	3.8	0	0	0	0	53	100
	No	280	32.3	152	55.9	61	36.3	26	54.2	36	29.3	1	1.3	-	-	-	-	-	-
Family history of	Yes	213	24.6	63	23.2	64	38.1	17	35.4	69	56.1	0	0	-	-	-	-	-	-
depression	Not known	35	4.0	12	4.4	14	8.3	3	6.3	6	4.9	0	0	-	-	-	-	-	-
	Missing	339	39.1	45	16.5	29	17.3	2	4.2	12	9.8	77	98.7	1	-	-	-	1	-
First degree	No	689	79.5	222	81.6	119	70.8	35	72.9	61	49.6	75	96.2	-	-	-	-	-	-
relative	Yes	174	20.1	50	18.4	49	29.2	13	27.1	62	50.4	0	0	-	-	-	-	-	-
Telative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
Second degree	No	787	90.8	251	92.3	141	83.9	40	83.3	103	83.7	75	96.2	-	-	-	-	-	-
relative	Yes	76	8.8	21	7.7	27	16.1	8	16.7	20	16.3	0	0	-	-	-	-	-	-
relative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
	No	323	37.3	166	61.0	65	38.7	33	68.8	54	43.9	1	1.3	-	-	-	-	-	-
Family history of	Yes	165	19.0	50	18.4	55	32.7	9	18.8	51	41.5	0	0	-	-	-	-	-	-
anxiety	Not known	40	4.6	11	4.0	19	11.3	4	8.3	6	4.9	0	0	-	-	-	-	-	-
	Missing	339	39.1	45	16.5	29	17.3	2	4.2	12	9.8	77	98.7	-	-	-	-	-	-
	No	715	82.5	229	84.2	119	70.8	40	83.3	75	61.0	75	96.2	1		-	-	1	-

First degree	Yes	148	17.1	43	15.8	49	29.2	8	16.7	48	39.0	0	0	_	_	_		_	_
relative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8		_	_	_	-	_
	No	827	95.4	264	97.1	152	90.5	47	97.9	112	91.1	75	96.2	-	-	-	-	-	-
Second degree	Yes	36	4.2	8	2.9	16	9.5	1	2.1	11	8.9	0	0	-	-	-	-	-	-
relative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
	No	412	47.5	191	70.2	101	60.1	37	77.1	79	64.2	0	0	-	-	-	-	-	-
Family history of	Yes	80	9.2	24	8.8	22	13.1	7	14.6	26	21.1	1	1.3	-	-	-	-	-	-
other mental	Not known	36	4.2	12	4.4	16	9.5	2	4.2	6	4.9	0	0	-	-	-	-	-	-
disorder	Missing	339	39.1	45	16.5	29	17.3	2	4.2	12	9.8	77	98.7	-	-	-	-	-	-
First description	No	810	93.4	260	95.6	152	90.5	42	87.5	105	85.4	74	94.9	-	-	-	-	-	-
First degree relative	Yes	53	6.1	12	4.4	16	9.5	6	12.5	18	14.6	1	1.3	-	-	-	-	-	-
Telative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
Cocond dograp	No	830	95.7	260	95.6	159	94.6	45	93.8	114	92.7	75	96.2	-	-	-	-	-	-
Second degree relative	Yes	33	3.8	12	4.4	9	5.4	3	6.3	9	7.3	0	0	-	-	-	-	-	-
Telative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
	No	414	47.8	194	71.3	113	67.3	35	72.9	68	55.3	0	0	-	-	-	-	-	-
Family history of	Yes	78	9.0	21	7.7	12	7.1	8	16.7	36	29.3	1	1.3	-	-	-	-	-	-
fibromyalgia	Not known	36	4.2	12	4.4	14	8.3	3	6.3	7	5.7	0	0	-	-	-	-	-	-
	Missing	339	39.1	45	16.5	29	17.3	2	4.2	12	9.8	77	98.7	-	-	-	-	-	-
First degree	No	807	93.1	257	94.5	160	95.2	42	87.5	97	78.9	74	94.9	-	-	-	-	-	-
relative	Yes	56	6.5	15	5.5	8	4.8	6	12.5	26	21.1	1	1.3	-	-	-	-	-	-
	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
Second degree	No	840	96.9	265	97.4	164	97.6	45	93.8	114	92.7	75	96.2	-	-	-	-	-	-
relative	Yes	23	2.7	7	2.6	4	2.4	3	6.3	9	7.3	0	0	-	-	-	-	-	-
	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
	No	458	52.8	209	76.8	117	69.6	43	89.6	84	68.3	1	1.3	-	-	-	-	-	-
Family history of	Yes	28	3.2	7	2.6	6	3.6	0	0	15	12.2	0	0	-	-	-	-	-	-
chronic fatigue	Not known	42	4.8	11	4.0	16	9.5	3	6.3	12	9.8	0	0	-	-	-	-	-	-
	Missing	339	39.1	45	16.5	29	17.3	2	4.2	12	9.8	77	98.7	-	-	-	-	-	-
First degree	No	843	97.2	269	98.9	163	97.0	48	100.0	111	90.2	75	96.2	-	-	-	-	-	-
relative	Yes	20	2.3	3	1.1	5	3.0	0	0	12	9.8	0	0	-	-	-	-	-	-

	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
Socond dograp	No	853	98.4	268	98.5	166	98.8	48	100	119	96.7	75	96.2	-	-	-	-	-	-
Second degree relative	Yes	10	1.2	4	1.5	2	1.2	0	0	4	3.3	0	0	-	-	-	-	-	-
Telative	Missing	4	0.5	0	0	0	0	0	0	0	0	3	3.8	-	-	-	-	-	-
	No	768	88.6	230	84.6	144	85.7	47	97.9	113	91.9	70	89.7	59	98.3	50	98.0	51	96.2
Has twin sibling	Yes	11	1.3	6	2.2	2	1.2	0	0	0	0	0	0	-	-	1	2.0	1	1.9
nas twin sibillig	Not known	7	0.8	1	0.4	1	0.6	0	0	2	1.6	2	2.6	-	-	0	0	1	1.9
	Missing	81	9.3	35	12.9	21	12.5	1	2.1	8	6.5	6	7.7	1	1.7	0	0	0	0
Has identical	No	7	0.8	4	1.5	1	0.6	0	0	0	0	-	-	0	0	0	0	1	1.9
twin sibling	Yes	4	0.5	2	0.7	1	0.6	0	0	0	0	-	-	0	0	1	2.0	0	0
twiii sibiiiig	Missing	856	98.7	266	97.8	166	98.8	48	100	123	100	-	-	60	100	50	98.0	0	0
Identical twin has	No	9	1.0	5	1.8	2	1.2	0	0	0	0	-	-	0	0	1	2.0		
abdominal	Yes	2	0.2	1	0.4	0	0	0	0	0	0	-	-	0	0	-	-		
symptoms	Missing	856	98.7	266	97.8	166	98.8	48	100	123	100	-	-	60	100	50	98.0	52	98.1
First degree	No	378	43.6	112	41.2	55	32.7	21	43.8	39	31.7	50	64.1	40	66.7	31	60.8	1	1.9
relative has	Yes	387	44.6	121	44.5	87	51.8	26	54.2	74	60.2	21	26.9	14	23.3	19	37.3	0	0
abdominal	Not known	21	2.4	4	1.5	5	3.0	0	0	2	1.6	1	1.3	5	8.3	1	2.0	0	0
symptoms	Missing	81	9.3	35	12.9	21	12.5	1	2.1	8	6.5	6	7.7	1	1.7	0	0	52	98.1

^{*}Missing study group allocation: n = 14

Table 7. SUBSTANCE USE IBS IBS Control IBS multi-Control -Control -Healthy **Total sample IBS** alone comorbidcomorbidmental comorbid controls mental somatic (N = 867)*(n = 272)mental somatic +somatic (n = 123)(n = 78)(n = 60)(n = 51)(n = 168)(n = 48)(n = 53)% % % % % % % n % n % n n n n n n n No 117 43 67 39.9 22.9 43 35 69.2 38.3 43.1 Alcohol use Yes 368 42.4 11 54 23 22 28 52.8 Missing No 638 73.6 203 74.6 123 73.2 40 83.3 92 74.8 55 70.5 41 68.3 38 74.5 42 79.2 Cigarette Yes 148 17.1 34 12.5 24 14.3 7 14.6 23 18.7 17 21.8 18 30.0 13 25.5 11 20.8 smoking 81 9.3 35 12.9 21 12.5 1 2.1 8 6.5 6 7.7 1 1.7 0 0 0 0 Missing No 750 86.5 230 84.6 141 83.9 44 91.7 107 87.0 69 88.5 57 95.0 50 98.0 48 90.6 Other smoking Yes 36 7 2.6 6 3.6 3 8 3 3.8 2 3.3 5 4.2 6.3 6.5 1 2.0 9.4 modalities 12.9 21 1 7.7 1 Missing 81 9.3 35 12.5 2.1 8 6.5 6 1.7 0 0 0 0 Chewing tobacco 11 1.3 2 0.7 1 0.6 1 2.1 2 1.6 2 2.6 1 1.7 0 0 2 3.8 0.1 0 0 0 0 0 0 0 0 0 0 0 0 2.0 0 0 Cigars 1 E-cigarettes 22 2.5 5 1.8 5 3.0 2 4.2 6 4.9 1 1.3 1 1.7 0 0 2 3.8 0 0 0 Pipe 0.1 0 0 0 0 0 0 0 0 0 0 0 1 1.9 М SD M SD М SD М SD М SD M SD M SD М SD М SD Units of alcohol / week 4.2 4.2 3.5 5 3 3 4.6 4 3.8 6.5 8.1 3.5 4.7 4.5 5.5 6.4 2.9 4.1 Number of cigarettes smoked / 9.4 6.5 7.7 5.8 11.3 8.1 9.7 4.5 11.9 6.7 8.7 6.4 10.2 6.7 7.9 6.01 7 4.7 day Number of cigarette packs 113.9 139.2 68 88.5 91.4 156.6 130.1 123.1 135.7 127.6 157.4 140.1 198.5 289.7 147.6 119.2 94.7 95.5 smoked / year

^{*}Missing study group allocation: n = 14

Table 8. RECENT MEDICATION	(last 3 mo	onths)																
	Total s	sample 867)*		alone 272)	come me	BS orbid- ental 168)	com	BS orbid- natic = 48)	com	nulti- orbid 123)	con	ilthy trols : 78)	me	trol – ntal = 60)	som	rol – natic : 51)	me +sor	ntrol ental matic = 53)
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Antidepressant	233	26.9	18	6.6	57	33.9	13	27.1	58	47.2	2	2.6	37	61.7	19	37.3	28	52.8
NAIDs (incl aspirin)	131	15.1	27	9.9	17	10.1	6	12.5	31	25.2	5	6.4	8	13.3	18	35.3	18	34.0
Antibiotics	10	1.2	4	1.5	3	1.8	0	0	2	1.6	1	1.3	0	0	0	0	0	0
Probiotics (capsulated or shots)	41	4.7	12	4.4	7	4.2	9	18.8	5	4.1	0	0	2	3.3	1	2.0	5	9.4
Laxatives	71	8.2	28	10.3	20	11.9	7	14.6	11	8.9	0	0	1	1.7	0	0	2	3.8
Acid suppressants	128	14.8	40	14.7	21	12.5	9	18.8	33	26.8	1	1.3	6	10.0	7	13.7	10	18.9
Antipasmodics	59	6.8	20	7.4	15	8.9	7	14.6	9	7.3	0	0	1	1.7	1	2.0	6	11.3
Antidiarrheal drugs	21	2.4	7	2.6	7	4.2	2	4.2	0	0	0	0	2	3.3	0	0	3	5.7
Phytotherapy	13	1.5	4	1.5	0	0	1	2.1	1	0.8	0	0	2	3.3	2	3.9	3	5.7
Prokinetic	7	0.8	0	0	3	1.8	1	2.1	2	1.6	0	0	0	0	1	2.0	0	0
Linaclotide	9	1.0	2	0.7	2	1.2	0	0	5	4.1	0	0	0	0	0	0	0	0
Lubiprostone	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Benzodiazepines	94	10.8	8	2.9	20	11.9	5	10.4	28	22.8	2	2.6	8	13.3	7	13.7	15	28.3
Antipsychotics	25	2.9	2	0.7	5	3.0	1	2.1	8	6.5	0	0	6	10.0	0	0	3	5.7
Antiepileptics	43	5.0	1	0.4	4	2.4	7	14.6	23	18.7	0	0	1	1.7	3	5.9	4	7.5
Opioids	29	3.3	1	0.4	3	1.8	5	10.4	12	9.8	0	0	0	0	5	9.8	3	5.7
Other	480	55.4	152	55.9	85	50.6	34	70.8	79	64.2	24	30.8	27	45.0	36	70.6	38	71.7

^{*}Missing study group allocation: n = 14

Table 9. Questionnaire descriptives and group comparisons (ANOVAs)

	Total s	sample	IBS a	lone		morbid- ntal	120 001	morbid- natic	IBS m			althy trols	Cont	rol – ntal		trol – natic	me	itrol ntal natic	F†
	М	SD	М	SD	М	SD	М	SD	М	SD	М	SD	М	SD	М	SD	М	SD	
IBS-SSS	202.2	122.6	226.6	101.6	244	97.8	274.1	100.1	294	99.3	26	44.5	112.7	81.7	140.6	102.5	142.7	86.5	74.20***
FIQ	31.3	23.9	17.4	14.6	28.2	17.5	45.2	21.5	54.3	22.8	7.2	10.6	29.9	18.3	52.7	17.2	52	20	89.06***
MFI – general fatigue	14	4.6	12.2	4.2	14.5	3.7	16.6	3.3	17.6	2.5	8.2	3.1	14.2	3.9	16.6	3.6	16.7	3.7	59.89***
MFI – physical fatigue	12.8	4.8	10.7	4.2	13.3	4.3	15.5	4.5	16.4	3.2	8	3.6	11.8	4.1	15.5	3.5	15.4	3.9	46.37***
MFI – reduced activity	11.6	4.7	9.2	4.1	11.9	3.9	13.1	4.8	15.3	4	7	2.8	12.9	4.1	13.3	3.7	14.4	3.9	45.37***
MFI – reduced motivation	10.3	4.2	8.7	3.5	11.2	4	10.4	4.	13.1	3.9	6.4	2.5	11	3.6	10.7	3.8	12.5	4.2	31.26***
MFI – mental fatigue	11.8	4.7	9.7	4.3	12.4	4.1	12.9	4.9	15	4.3	8.1	3.5	13	4.5	12.9	4	14.6	4.1	27.99***
GAD7	6.8	5.4	4.4	4.1	8.2	5.3	5.3	4.5	11.1	5.7	1.9	2.6	8.9	4	6.9	4.9	10.5	4.5	42.01***
PHQ9	8.46	6.33	5.15	4.29	9.6	5.94	8.09	4.12	13.73	6.12	2.08	2.48	11.9	6.7	9.22	5.17	12.76	5.5	53.90***
PHQ15	12.5	6.9	10.7	4.8	13.3	5.2	16.1	5.1	18.9	8.1	3.4	2.8	10.1	4.6	15.3	7	15.3	5.7	59.00***

[†] Comparisons between groups performed through ANOVAS with the Bonferroni correction.

IBS-SSS = Irritable Bowel Syndrome Severity Scoring System; FIQ = Fibromyalgia Impact Questionnaire; MFI = Multidimensional Fatigue Index; GAD-7 = Generalized Anxiety Disorder questionnaire (anxiety symptoms); PHQ-9 = Patient Health Questionnaire-9 (depressive symptoms); PHQ-15 = Patient Health Questionnaire-15 (somatic symptoms).

^{***}p < .001.

Table 10. ANOVA Multiple Comparisons

Bonferroni

Dependent						95% Confide	ence Interval
Variable	S	tudy Group	Mean Difference	Std. Error	р	Lower Bound	Upper Bound
IBS-SSS	1 IBS alone	2 IBS comorbid mental	-17.335	10.254	1.000	-49.49	14.82
		3 IBS comorbid somatic	-47.493	15.539	.065	-96.21	1.23
		4 IBS multicomorbid	-67.357 [*]	11.119	<.001	-102.22	-32.49
		5 Healthy control	200.616*	12.726	<.001	160.71	240.52
		6 Control mental	113.952*	14.193	<.001	69.45	158.45
		7 Control somatic	85.990*	14.867	<.001	39.38	132.61
		8 Control multicomorbid	83.932*	14.515	<.001	38.42	129.44
	2 IBS comorbid mental	1 IBS alone	17.335	10.254	1.000	-14.82	49.49
		3 IBS comorbid somatic	-30.158	16.246	1.000	-81.10	20.78
		4 IBS multicomorbid	-50.022 [*]	12.087	.001	-87.92	-12.12
		5 Healthy control	217.951*	13.580	<.001	175.37	260.53
		6 Control mental	131.287 [*]	14.963	<.001	84.37	178.20
		7 Control somatic	103.325*	15.605	<.001	54.40	152.25
		8 Control multicomorbid	101.267*	15.269	<.001	53.39	149.14
	3 IBS comorbid somatic	1 IBS alone	47.493	15.539	.065	-1.23	96.21
		2 IBS comorbid mental	30.158	16.246	1.000	-20.78	81.10
		4 IBS multicomorbid	-19.864	16.805	1.000	-72.55	32.83
		5 Healthy control	248.109*	17.909	<.001	191.96	304.26
		6 Control mental	161.445 [*]	18.979	<.001	101.94	220.95
		7 Control somatic	133.483*	19.489	<.001	72.38	194.59
		8 Control multicomorbid	131.425 [*]	19.221	<.001	71.16	191.69

4 IBS multicomorbid	1 IBS alone	67.357 [*]	11.119	<.001	32.49	102.
	2 IBS comorbid mental	50.022 [*]	12.087	.001	12.12	87.9
	3 IBS comorbid somatic	19.864	16.805	1.000	-32.83	72.5
	5 Healthy control	267.973 [*]	14.245	<.001	223.31	312.
	6 Control mental	181.309*	15.569	<.001	132.49	230.
	7 Control somatic	153.347 [*]	16.186	<.001	102.60	204.
	8 Control multicomorbid	151.288 [*]	15.863	<.001	101.55	201.
5 Healthy control	1 IBS alone	-200.616 [*]	12.726	<.001	-240.52	-160
	2 IBS comorbid mental	-217.951 [*]	13.580	<.001	-260.53	-175
	3 IBS comorbid somatic	-248.109*	17.909	<.001	-304.26	-191
	4 IBS multicomorbid	-267.973 [*]	14.245	<.001	-312.64	-223
	6 Control mental	-86.664*	16.755	<.001	-139.20	-34.
	7 Control somatic	-114.626 [*]	17.330	<.001	-168.96	-60.
	8 Control multicomorbid	-116.684 [*]	17.028	<.001	-170.07	-63
6 Control mental	1 IBS alone	-113.952*	14.193	<.001	-158.45	-69
	2 IBS comorbid mental	-131.287 [*]	14.963	<.001	-178.20	-84.
	3 IBS comorbid somatic	-161.445 [*]	18.979	<.001	-220.95	-101
	4 IBS multicomorbid	-181.309*	15.569	<.001	-230.12	-132
	5 Healthy control	86.664*	16.755	<.001	34.13	139
	7 Control somatic	-27.962	18.434	1.000	-85.76	29.
	8 Control multicomorbid	-30.021	18.150	1.000	-86.93	26.
7 Control somatic	1 IBS alone	-85.990 [*]	14.867	<.001	-132.61	-39.
	2 IBS comorbid mental	-103.325 [*]	15.605	<.001	-152.25	-54.
	3 IBS comorbid somatic	-133.483 [*]	19.489	<.001	-194.59	-72.
	4 IBS multicomorbid	-153.347 [*]	16.186	<.001	-204.10	-102
	5 Healthy control	114.626*	17.330	<.001	60.29	168.

		6 Control mental	27.962	18.434	1.000	-29.83	85.76
		8 Control multicomorbid	-2.058	18.682	1.000	-60.64	56.52
	8 Control multicomorbid	1 IBS alone	-83.932*	14.515	<.001	-129.44	-38.42
		2 IBS comorbid mental	-101.267*	15.269	<.001	-149.14	-53.39
		3 IBS comorbid somatic	-131.425 [*]	19.221	<.001	-191.69	-71.16
		4 IBS multicomorbid	-151.288 [*]	15.863	<.001	-201.02	-101.55
		5 Healthy control	116.684*	17.028	<.001	63.29	170.07
		6 Control mental	30.021	18.150	1.000	-26.89	86.93
		7 Control somatic	2.058	18.682	1.000	-56.52	60.64
FIQ	1 IBS alone	2 IBS comorbid mental	-10.87780 [*]	1.92615	<.001	-16.9173	-4.8383
		3 IBS comorbid somatic	-27.86774 [*]	2.91582	<.001	-37.0103	-18.7252
		4 IBS multicomorbid	-36.91980*	2.08804	<.001	-43.4669	-30.3727
		5 Healthy control	10.18239*	2.41386	<.001	2.6137	17.7511
		6 Control mental	-12.49816 [*]	2.70321	<.001	-20.9741	-4.0222
		7 Control somatic	-35.34146*	2.81349	<.001	-44.1632	-26.5197
		8 Control multicomorbid	-34.61823*	2.72391	<.001	-43.1591	-26.0774
	2 IBS comorbid mental	1 IBS alone	10.87780*	1.92615	<.001	4.8383	16.9173
		3 IBS comorbid somatic	-16.98994*	3.04598	<.001	-26.5406	-7.4392
		4 IBS multicomorbid	-26.04200*	2.26626	<.001	-33.1479	-18.9361
		5 Healthy control	21.06019 *	2.56958	<.001	13.0033	29.1171
		6 Control mental	-1.62036	2.84313	1.000	-10.5350	7.2943
		7 Control somatic	-24.46366*	2.94818	<.001	-33.7077	-15.2196
		8 Control multicomorbid	-23.74043 [*]	2.86281	<.001	-32.7168	-14.7640
	3 IBS comorbid somatic	1 IBS alone	27.86774*	2.91582	<.001	18.7252	37.0103
		2 IBS comorbid mental	16.98994*	3.04598	<.001	7.4392	26.5406
		4 IBS multicomorbid	-9.05206	3.15085	.117	-18.9316	.8275

	5 Healthy control	38.05013*	3.37560	<.001	27.4659	48.634
	6 Control mental	15.36958 [*]	3.58822	<.001	4.1187	26.620
	7 Control somatic	-7.47372	3.67202	1.000	-18.9874	4.0399
	8 Control multicomorbid	-6.75049	3.60384	1.000	-18.0504	4.549
4 IBS multicomorbid	1 IBS alone	36.91980 [*]	2.08804	<.001	30.3727	43.466
	2 IBS comorbid mental	26.04200*	2.26626	<.001	18.9361	33.147
	3 IBS comorbid somatic	9.05206	3.15085	.117	8275	18.931
	5 Healthy control	47.10219 [*]	2.69306	<.001	38.6581	55.546
	6 Control mental	24.42164*	2.95521	<.001	15.1556	33.687
	7 Control somatic	1.57834	3.05641	1.000	-8.0051	11.161
	8 Control multicomorbid	2.30157	2.97415	1.000	-7.0239	11.627
5 Healthy control	1 IBS alone	-10.18239*	2.41386	<.001	-17.7511	-2.613
	2 IBS comorbid mental	-21.06019*	2.56958	<.001	-29.1171	-13.00
	3 IBS comorbid somatic	-38.05013 [*]	3.37560	<.001	-48.6344	-27.46
	4 IBS multicomorbid	-47.10219*	2.69306	<.001	-55.5463	-38.65
	6 Control mental	-22.68055 [*]	3.19375	<.001	-32.6946	-12.66
	7 Control somatic	-45.52385 [*]	3.28762	<.001	-55.8322	-35.21
	8 Control multicomorbid	-44.80062*	3.21129	<.001	-54.8696	-34.73
6 Control mental	1 IBS alone	12.49816 [*]	2.70321	<.001	4.0222	20.974
	2 IBS comorbid mental	1.62036	2.84313	1.000	-7.2943	10.535
	3 IBS comorbid somatic	-15.36958 [*]	3.58822	<.001	-26.6205	-4.118
	4 IBS multicomorbid	-24.42164*	2.95521	<.001	-33.6877	-15.15
	5 Healthy control	22.68055*	3.19375	<.001	12.6665	32.69
	7 Control somatic	-22.84330 [*]	3.50558	<.001	-33.8351	-11.85
	8 Control multicomorbid	-22.12007*	3.43410	<.001	-32.8877	-11.35
7 Control somatic	1 IBS alone	35.34146*	2.81349	<.001	26.5197	44.163

		2 IBS comorbid mental	24.46366*	2.94818	<.001	15.2196	33.7077
		3 IBS comorbid somatic	7.47372	3.67202	1.000	-4.0399	18.9874
		4 IBS multicomorbid	-1.57834	3.05641	1.000	-11.1617	8.0051
		5 Healthy control	45.52385 [*]	3.28762	<.001	35.2155	55.8322
		6 Control mental	22.84330 [*]	3.50558	<.001	11.8515	33.8351
		8 Control multicomorbid	.72323	3.52156	1.000	-10.3187	11.7651
	8 Control multicomorbid	1 IBS alone	34.61823 [*]	2.72391	<.001	26.0774	43.1591
		2 IBS comorbid mental	23.74043 [*]	2.86281	<.001	14.7640	32.7168
		3 IBS comorbid somatic	6.75049	3.60384	1.000	-4.5494	18.0504
		4 IBS multicomorbid	-2.30157	2.97415	1.000	-11.6270	7.0239
		5 Healthy control	44.80062 [*]	3.21129	<.001	34.7316	54.8696
		6 Control mental	22.12007 [*]	3.43410	<.001	11.3524	32.8877
		7 Control somatic	72323	3.52156	1.000	-11.7651	10.3187
MFI	1 IBS alone	2 IBS comorbid mental	-2.353 [*]	.398	<.001	-3.60	-1.10
General fatigue		3 IBS comorbid somatic	-4.407 [*]	.603	<.001	-6.30	-2.52
		4 IBS multicomorbid	-5.418 [*]	.432	<.001	-6.77	-4.06
		5 Healthy control	3.983*	.494	<.001	2.43	5.53
		6 Control mental	-2.055*	.568	.009	-3.83	27
		7 Control somatic	-4.286 [*]	.587	<.001	-6.13	-2.45
		8 Control multicomorbid	-4.550*	.563	<.001	-6.32	-2.78
	2 IBS comorbid mental	1 IBS alone	2.353 [*]	.398	<.001	1.10	3.60
		3 IBS comorbid somatic	-2.054 [*]	.630	.033	-4.03	08
		4 IBS multicomorbid	-3.065 [*]	.469	<.001	-4.53	-1.60
		5 Healthy control	6.336*	.527	<.001	4.69	7.99
		6 Control mental	.299	.596	1.000	-1.57	2.17
		7 Control somatic	-1.932 [*]	.615	.049	-3.86	01

	8 Control multicomorbid	-2.197*	.592	.006	-4.05	
3 IBS comorbid somatic	1 IBS alone	4.407*	.603	<.001	2.52	6
	2 IBS comorbid mental	2.054*	.630	.033	.08	4
	4 IBS multicomorbid	-1.011	.652	1.000	-3.05	1
	5 Healthy control	8.390 [*]	.694	<.001	6.21	10
	6 Control mental	2.352*	.749	.049	.00	4
	7 Control somatic	.121	.763	1.000	-2.27	2
	8 Control multicomorbid	143	.745	1.000	-2.48	2
4 IBS multicomorbid	1 IBS alone	5.418 [*]	.432	<.001	4.06	6
	2 IBS comorbid mental	3.065*	.469	<.001	1.60	4
	3 IBS comorbid somatic	1.011	.652	1.000	-1.03	3
	5 Healthy control	9.401*	.552	<.001	7.67	11
	6 Control mental	3.364*	.619	<.001	1.42	5
	7 Control somatic	1.133	.637	1.000	86	3
	8 Control multicomorbid	.868	.615	1.000	-1.06	2
5 Healthy control	1 IBS alone	-3.983*	.494	<.001	-5.53	-2
	2 IBS comorbid mental	-6.336 [*]	.527	<.001	-7.99	-4
	3 IBS comorbid somatic	-8.390 [*]	.694	<.001	-10.57	-6
	4 IBS multicomorbid	-9.401*	.552	<.001	-11.13	-7
	6 Control mental	-6.038 [*]	.664	<.001	-8.12	-3
	7 Control somatic	-8.269*	.681	<.001	-10.40	-6
	8 Control multicomorbid	-8.533 [*]	.660	<.001	-10.60	-6
6 Control mental	1 IBS alone	2.055*	.568	.009	.27	3
	2 IBS comorbid mental	299	.596	1.000	-2.17	1
	3 IBS comorbid somatic	-2.352*	.749	.049	-4.70	
	4 IBS multicomorbid	-3.364 [*]	.619	<.001	-5.31	-1

		5 Healthy control	6.038*	.664	<.001	3.96	8.12
		7 Control somatic	-2.231	.736	.070	-4.54	.08
		8 Control multicomorbid	-2.496 [*]	.717	.015	-4.74	25
	7 Control somatic	1 IBS alone	4.286 [*]	.587	<.001	2.45	6.13
		2 IBS comorbid mental	1.932*	.615	.049	.01	3.86
		3 IBS comorbid somatic	121	.763	1.000	-2.51	2.27
		4 IBS multicomorbid	-1.133	.637	1.000	-3.13	.86
		5 Healthy control	8.269 [*]	.681	<.001	6.13	10.40
		6 Control mental	2.231	.736	.070	08	4.54
		8 Control multicomorbid	265	.732	1.000	-2.56	2.03
	8 Control multicomorbid	1 IBS alone	4.550 [*]	.563	<.001	2.78	6.32
		2 IBS comorbid mental	2.197*	.592	.006	.34	4.05
		3 IBS comorbid somatic	.143	.745	1.000	-2.19	2.48
		4 IBS multicomorbid	868	.615	1.000	-2.80	1.06
		5 Healthy control	8.533 [*]	.660	<.001	6.46	10.60
		6 Control mental	2.496*	.717	.015	.25	4.74
		7 Control somatic	.265	.732	1.000	-2.03	2.56
1FI	1 IBS alone	2 IBS comorbid mental	-2.510 [*]	.434	<.001	-3.87	-1.15
hysical fatigue		3 IBS comorbid somatic	-4.791 [*]	.663	<.001	-6.87	-2.71
		4 IBS multicomorbid	-5.658 [*]	.470	<.001	-7.13	-4.18
		5 Healthy control	2.785*	.538	<.001	1.10	4.47
		6 Control mental	-1.079	.618	1.000	-3.02	.86
		7 Control somatic	-4.798*	.633	<.001	-6.78	-2.81
		8 Control multicomorbid	-4.648*	.618	<.001	-6.59	-2.71
	2 IBS comorbid mental	1 IBS alone	2.510*	.434	<.001	1.15	3.87
		3 IBS comorbid somatic	-2.281 [*]	.692	.029	-4.45	11

	4 IBS multicomorbid	-3.148*	.510	<.001	-4.75	-1
	5 Healthy control	5.295 [*]	.573	<.001	3.50	7
	6 Control mental	1.430	.649	.781	61	3
	7 Control somatic	-2.288 [*]	.664	.017	-4.37	-
	8 Control multicomorbid	-2.139 [*]	.649	.029	-4.17	-
3 IBS comorbid somatic	1 IBS alone	4.791*	.663	<.001	2.71	ϵ
	2 IBS comorbid mental	2.281 [*]	.692	.029	.11	4
	4 IBS multicomorbid	867	.715	1.000	-3.11	1
	5 Healthy control	7.576*	.761	<.001	5.19	g
	6 Control mental	3.711 [*]	.820	<.001	1.14	ϵ
	7 Control somatic	007	.832	1.000	-2.61	2
	8 Control multicomorbid	.143	.820	1.000	-2.43	2
4 IBS multicomorbid	1 IBS alone	5.658*	.470	<.001	4.18	7
	2 IBS comorbid mental	3.148 [*]	.510	<.001	1.55	4
	3 IBS comorbid somatic	.867	.715	1.000	-1.38	
	5 Healthy control	8.443 [*]	.601	<.001	6.56	1
	6 Control mental	4.578 [*]	.674	<.001	2.46	6
	7 Control somatic	.860	.688	1.000	-1.30	3
	8 Control multicomorbid	1.010	.674	1.000	-1.10	3
5 Healthy control	1 IBS alone	-2.785 [*]	.538	<.001	-4.47	-:
	2 IBS comorbid mental	-5.295 [*]	.573	<.001	-7.09	-;
	3 IBS comorbid somatic	-7.576 [*]	.761	<.001	-9.96	-!
	4 IBS multicomorbid	-8.443 [*]	.601	<.001	-10.33	-
	6 Control mental	-3.865 [*]	.723	<.001	-6.13	-
	7 Control somatic	-7.583 [*]	.736	<.001	-9.89	-
	8 Control multicomorbid	-7.433 [*]	.723	<.001	-9.70	-!

	6 Control mental	1 IBS alone	1.079	.618	1.000	86	3.02
		2 IBS comorbid mental	-1.430	.649	.781	-3.47	.61
		3 IBS comorbid somatic	-3.711 [*]	.820	<.001	-6.28	-1.14
		4 IBS multicomorbid	-4.578 [*]	.674	<.001	-6.69	-2.46
		5 Healthy control	3.865 [*]	.723	<.001	1.60	6.13
		7 Control somatic	-3.718 [*]	.797	<.001	-6.22	-1.22
		8 Control multicomorbid	-3.569 [*]	.784	<.001	-6.03	-1.11
	7 Control somatic	1 IBS alone	4.798*	.633	<.001	2.81	6.78
		2 IBS comorbid mental	2.288*	.664	.017	.21	4.37
		3 IBS comorbid somatic	.007	.832	1.000	-2.60	2.61
		4 IBS multicomorbid	860	.688	1.000	-3.02	1.30
		5 Healthy control	7.583 [*]	.736	<.001	5.27	9.89
		6 Control mental	3.718 [*]	.797	<.001	1.22	6.22
		8 Control multicomorbid	.150	.797	1.000	-2.35	2.65
	8 Control multicomorbid	1 IBS alone	4.648*	.618	<.001	2.71	6.59
		2 IBS comorbid mental	2.139 [*]	.649	.029	.10	4.17
		3 IBS comorbid somatic	143	.820	1.000	-2.71	2.43
		4 IBS multicomorbid	-1.010	.674	1.000	-3.12	1.10
		5 Healthy control	7.433 [*]	.723	<.001	5.17	9.70
		6 Control mental	3.569 [*]	.784	<.001	1.11	6.03
		7 Control somatic	150	.797	1.000	-2.65	2.35
MFI	1 IBS alone	2 IBS comorbid mental	-2.695*	.429	<.001	-4.04	-1.35
Reduced		3 IBS comorbid somatic	-3.813*	.649	<.001	-5.85	-1.78
Activity		4 IBS multicomorbid	-6.039*	.465	<.001	-7.50	-4.58
		5 Healthy control	2.205*	.532	.001	.54	3.87
		6 Control mental	-3.691 [*]	.607	<.001	-5.59	-1.79

	7 Control somatic	-4.066*	.632	<.001	-6.05	-2.0
	8 Control multicomorbid	-5.114 [*]	.607	<.001	-7.02	-3.
2 IBS comorbid mental	1 IBS alone	2. 695*	.429	<.001	1.35	4.0
	3 IBS comorbid somatic	-1.118	.678	1.000	-3.24	1.
	4 IBS multicomorbid	-3.343 [*]	.505	<.001	-4.93	-1.
	5 Healthy control	4.900*	.567	<.001	3.12	6.
	6 Control mental	996	.637	1.000	-2.99	1.
	7 Control somatic	-1.370	.662	1.000	-3.44	.7
	8 Control multicomorbid	-2.419 [*]	.637	.005	-4.42	4
3 IBS comorbid somatic	1 IBS alone	3.813 [*]	.649	<.001	1.78	5.
	2 IBS comorbid mental	1.118	.678	1.000	-1.01	3.
	4 IBS multicomorbid	-2.226 [*]	.702	.044	-4.43	
	5 Healthy control	6.018*	.748	<.001	3.67	8.
	6 Control mental	.122	.802	1.000	-2.39	2.
	7 Control somatic	252	.822	1.000	-2.83	2.
	8 Control multicomorbid	-1.301	.802	1.000	-3.82	1.
4 IBS multicomorbid	1 IBS alone	6.039*	.465	<.001	4.58	7.
	2 IBS comorbid mental	3.343*	.505	<.001	1.76	4.
	3 IBS comorbid somatic	2.226*	.702	.044	.03	4.
	5 Healthy control	8.244*	.595	<.001	6.38	10
	6 Control mental	2.348*	.662	.012	.27	4.
	7 Control somatic	1.973	.686	.115	18	4.
	8 Control multicomorbid	.925	.662	1.000	-1.15	3.
5 Healthy control	1 IBS alone	-2.205*	.532	.001	-3.87	!
	2 IBS comorbid mental	-4.900 [*]	.567	<.001	-6.68	-3
	3 IBS comorbid somatic	-6.018 [*]	.748	<.001	-8.36	-3.

		4 IBS multicomorbid	-8.244*	.595	<.001	-10.11	-6.38
		6 Control mental	-5.896 [*]	.711	<.001	-8.12	-3.67
		7 Control somatic	-6.270 [*]	.733	<.001	-8.57	-3.97
		8 Control multicomorbid	-7.319 [*]	.711	<.001	-9.55	-5.09
	6 Control mental	1 IBS alone	3.691*	.607	<.001	1.79	5.59
		2 IBS comorbid mental	.996	.637	1.000	-1.00	2.99
		3 IBS comorbid somatic	122	.802	1.000	-2.64	2.39
		4 IBS multicomorbid	-2.348 [*]	.662	.012	-4.42	27
		5 Healthy control	5.896*	.711	<.001	3.67	8.12
		7 Control somatic	375	.788	1.000	-2.85	2.10
		8 Control multicomorbid	-1.423	.768	1.000	-3.83	.99
	7 Control somatic	1 IBS alone	4.066*	.632	<.001	2.08	6.05
		2 IBS comorbid mental	1.370	.662	1.000	70	3.44
		3 IBS comorbid somatic	.252	.822	1.000	-2.32	2.83
		4 IBS multicomorbid	-1.973	.686	.115	-4.12	.18
		5 Healthy control	6.270*	.733	<.001	3.97	8.57
		6 Control mental	.375	.788	1.000	-2.10	2.85
		8 Control multicomorbid	-1.048	.788	1.000	-3.52	1.42
	8 Control multicomorbid	1 IBS alone	5.114 [*]	.607	<.001	3.21	7.02
		2 IBS comorbid mental	2.419*	.637	.005	.42	4.42
		3 IBS comorbid somatic	1.301	.802	1.000	-1.22	3.82
		4 IBS multicomorbid	925	.662	1.000	-3.00	1.15
		5 Healthy control	7.319 [*]	.711	<.001	5.09	9.55
		6 Control mental	1.423	.768	1.000	99	3.83
		7 Control somatic	1.048	.788	1.000	-1.42	3.52
ЛFI	1 IBS alone	2 IBS comorbid mental	-2.522 [*]	.401	<.001	-3.78	-1.26

Reduced		3 IBS comorbid somatic	-1.713	.613	.150	-3.64	.21
Motivation		4 IBS multicomorbid	-4.463 [*]	.435	<.001	-5.83	-3.10
		5 Healthy control	2.303 [*]	.498	<.001	.74	3.86
		6 Control mental	-2.302 [*]	.572	.002	-4.10	51
		7 Control somatic	-2.080 [*]	.596	.014	-3.95	21
		8 Control multicomorbid	-3.851 [*]	.572	<.001	-5.64	-2.06
	2 IBS comorbid mental	1 IBS alone	2.522 [*]	.401	<.001	1.26	3.78
		3 IBS comorbid somatic	.809	.640	1.000	-1.20	2.82
		4 IBS multicomorbid	-1.940 [*]	.472	.001	-3.42	46
		5 Healthy control	4.825*	.531	<.001	3.16	6.49
		6 Control mental	.220	.601	1.000	-1.66	2.10
		7 Control somatic	.442	.624	1.000	-1.51	2.40
		8 Control multicomorbid	-1.329	.601	.764	-3.21	.55
	3 IBS comorbid somatic	1 IBS alone	1.713	.613	.150	21	3.64
		2 IBS comorbid mental	809	.640	1.000	-2.82	1.20
		4 IBS multicomorbid	-2.749 [*]	.662	.001	-4.82	67
		5 Healthy control	4.016 [*]	.705	<.001	1.81	6.23
		6 Control mental	589	.759	1.000	-2.97	1.79
		7 Control somatic	367	.778	1.000	-2.81	2.07
		8 Control multicomorbid	-2.138	.759	.140	-4.52	.24
	4 IBS multicomorbid	1 IBS alone	4.463 [*]	.435	<.001	3.10	5.83
		2 IBS comorbid mental	1.940*	.472	.001	.46	3.42
		3 IBS comorbid somatic	2.749*	.662	.001	.67	4.82
		5 Healthy control	6.765*	.556	<.001	5.02	8.51
		6 Control mental	2.161*	.624	.016	.20	4.12
		7 Control somatic	2.382 [*]	.646	.007	.36	4.41

	8 Control multicomorbid	.612	.624	1.000	-1.34	2
5 Healthy control	1 IBS alone	-2.303 [*]	.498	<.001	-3.86	
	2 IBS comorbid mental	-4.825 [*]	.531	<.001	-6.49	-3
	3 IBS comorbid somatic	-4.016 [*]	.705	<.001	-6.23	-1
	4 IBS multicomorbid	-6.765 [*]	.556	<.001	-8.51	-5
	6 Control mental	-4.605 [*]	.669	<.001	-6.70	-2
	7 Control somatic	-4.383 [*]	.690	<.001	-6.55	-2
	8 Control multicomorbid	-6.154 [*]	.669	<.001	-8.25	-4
6 Control mental	1 IBS alone	2.302*	.572	.002	.51	4
	2 IBS comorbid mental	220	.601	1.000	-2.10	1
	3 IBS comorbid somatic	.589	.759	1.000	-1.79	2
	4 IBS multicomorbid	-2.161 [*]	.624	.016	-4.12	-
	5 Healthy control	4.605*	.669	<.001	2.51	6
	7 Control somatic	.222	.745	1.000	-2.12	2
	8 Control multicomorbid	-1.549	.726	.929	-3.83	
7 Control somatic	1 IBS alone	2.080*	.596	.014	.21	3
	2 IBS comorbid mental	442	.624	1.000	-2.40	1
	3 IBS comorbid somatic	.367	.778	1.000	-2.07	2
	4 IBS multicomorbid	-2.382 [*]	.646	.007	-4.41	
	5 Healthy control	4.383*	.690	<.001	2.22	6
	6 Control mental	222	.745	1.000	-2.56	2
	8 Control multicomorbid	-1.771	.745	.498	-4.11	
8 Control multicomorbid	1 IBS alone	3.851*	.572	<.001	2.06	5
	2 IBS comorbid mental	1.329	.601	.764	55	3
	3 IBS comorbid somatic	2.138	.759	.140	24	4
	4 IBS multicomorbid	612	.624	1.000	-2.57	1

		5 Healthy control	6.154*	.669	<.001	4.06	8.25
		6 Control mental	1.549	.726	.929	73	3.83
		7 Control somatic	1.771	.745	.498	57	4.11
MFI	1 IBS alone	2 IBS comorbid mental	-2.579 [*]	.462	<.001	-4.03	-1.13
Mental Fatigue		3 IBS comorbid somatic	-3.024 [*]	.700	<.001	-5.22	83
		4 IBS multicomorbid	-5.109 [*]	.501	<.001	-6.68	-3.54
		5 Healthy control	1.808*	.573	.047	.01	3.60
		6 Control mental	-2.706 [*]	.659	.001	-4.77	64
		7 Control somatic	-3.007*	.687	<.001	-5.16	85
		8 Control multicomorbid	-4.765 [*]	.659	<.001	-6.83	-2.70
	2 IBS comorbid mental	1 IBS alone	2.579 [*]	.462	<.001	1.13	4.03
		3 IBS comorbid somatic	444	.731	1.000	-2.74	1.85
		4 IBS multicomorbid	-2.530 [*]	.544	<.001	-4.23	83
		5 Healthy control	4.387*	.611	<.001	2.47	6.30
		6 Control mental	127	.692	1.000	-2.30	2.04
		7 Control somatic	428	.719	1.000	-2.68	1.83
		8 Control multicomorbid	-2.185 [*]	.692	.046	-4.35	02
	3 IBS comorbid somatic	1 IBS alone	3.024*	.700	<.001	.83	5.22
		2 IBS comorbid mental	.444	.731	1.000	-1.85	2.74
		4 IBS multicomorbid	-2.086	.756	.166	-4.46	.28
		5 Healthy control	4.832*	.806	<.001	2.31	7.36
		6 Control mental	.318	.868	1.000	-2.41	3.04
		7 Control somatic	.017	.890	1.000	-2.77	2.81
		8 Control multicomorbid	-1.741	.868	1.000	-4.46	.98
	4 IBS multicomorbid	1 IBS alone	5.109*	.501	<.001	3.54	6.68
		2 IBS comorbid mental	2.530*	.544	<.001	.83	4.23

	3 IBS comorbid somatic	2.086	.756	.166	28	4.4
	5 Healthy control	6.917 [*]	.641	<.001	4.91	8.9
	6 Control mental	2.403*	.718	.024	.15	4.6
	7 Control somatic	2.102	.744	.136	23	4.4
	8 Control multicomorbid	.345	.718	1.000	-1.91	2.6
5 Healthy control	1 IBS alone	-1.808 [*]	.573	.047	-3.60	0
	2 IBS comorbid mental	-4.387 [*]	.611	<.001	-6.30	-2.
	3 IBS comorbid somatic	-4.832 [*]	.806	<.001	-7.36	-2.:
	4 IBS multicomorbid	-6.917*	.641	<.001	-8.93	-4.
	6 Control mental	-4.514 [*]	.770	<.001	-6.93	-2.
	7 Control somatic	-4.815 [*]	.795	<.001	-7.31	-2.
	8 Control multicomorbid	-6.573 [*]	.770	<.001	-8.99	-4.
6 Control mental	1 IBS alone	2.706*	.659	.001	.64	4.7
	2 IBS comorbid mental	.127	.692	1.000	-2.04	2.3
	3 IBS comorbid somatic	318	.868	1.000	-3.04	2.
	4 IBS multicomorbid	-2.403 [*]	.718	.024	-4.66	:
	5 Healthy control	4.514 [*]	.770	<.001	2.10	6.9
	7 Control somatic	301	.858	1.000	-2.99	2.3
	8 Control multicomorbid	-2.059	.836	.392	-4.68	.5
7 Control somatic	1 IBS alone	3.007*	.687	<.001	.85	5.:
	2 IBS comorbid mental	.428	.719	1.000	-1.83	2.0
	3 IBS comorbid somatic	017	.890	1.000	-2.81	2.
	4 IBS multicomorbid	-2.102	.744	.136	-4.44	.2
	5 Healthy control	4.815*	.795	<.001	2.32	7.3
	6 Control mental	.301	.858	1.000	-2.39	2.9
	8 Control multicomorbid	-1.758	.858	1.000	-4.45	.9

	8 Control multicomorbid	1 IBS alone	4.765 [*]	.659	<.001	2.70	6.83
		2 IBS comorbid mental	2.185 [*]	.692	.046	.02	4.35
		3 IBS comorbid somatic	1.741	.868	1.000	98	4.46
		4 IBS multicomorbid	345	.718	1.000	-2.60	1.91
		5 Healthy control	6.573 [*]	.770	<.001	4.16	8.99
		6 Control mental	2.059	.836	.392	56	4.68
		7 Control somatic	1.758	.858	1.000	93	4.45
GAD-7	1 IBS alone	2 IBS comorbid mental	-3.871 [*]	.505	<.001	-5.46	-2.29
		3 IBS comorbid somatic	919	.766	1.000	-3.32	1.48
		4 IBS multicomorbid	-6.693 [*]	.548	<.001	-8.41	-4.97
		5 Healthy control	2.450 [*]	.627	.003	.48	4.42
		6 Control mental	-4.517 [*]	.704	<.001	-6.73	-2.31
		7 Control somatic	-2.503 [*]	.733	.019	-4.80	21
		8 Control multicomorbid	-6.165 [*]	.715	<.001	-8.41	-3.92
	2 IBS comorbid mental	1 IBS alone	3.871 [*]	.505	<.001	2.29	5.46
		3 IBS comorbid somatic	2.952*	.800	.007	.44	5.46
		4 IBS multicomorbid	-2.822*	.595	<.001	-4.69	96
		5 Healthy control	6.321 [*]	.669	<.001	4.22	8.42
		6 Control mental	646	.742	1.000	-2.97	1.68
		7 Control somatic	1.367	.769	1.000	-1.04	3.78
		8 Control multicomorbid	-2.295	.752	.066	-4.65	.06
	3 IBS comorbid somatic	1 IBS alone	.919	.766	1.000	-1.48	3.32
		2 IBS comorbid mental	-2.952 [*]	.800	.007	-5.46	44
		4 IBS multicomorbid	-5.774 [*]	.828	<.001	-8.37	-3.18
		5 Healthy control	3.369 [*]	.882	.004	.60	6.13
		6 Control mental	-3.598 [*]	.939	.004	-6.54	65

	7 Control somatic	-1.584	.960	1.000	-4.59	1.
	8 Control multicomorbid	-5.247 [*]	.947	<.001	-8.21	-2
4 IBS multicomorbid	1 IBS alone	6.693*	.548	<.001	4.97	8
	2 IBS comorbid mental	2.822*	.595	<.001	.96	4
	3 IBS comorbid somatic	5.774 [*]	.828	<.001	3.18	8
	5 Healthy control	9.143*	.702	<.001	6.94	11
	6 Control mental	2.176	.771	.138	24	4
	7 Control somatic	4.190 [*]	.797	<.001	1.69	6
	8 Control multicomorbid	.527	.781	1.000	-1.92	2
5 Healthy control	1 IBS alone	-2.450 [*]	.627	.003	-4.42	
	2 IBS comorbid mental	-6.321 [*]	.669	<.001	-8.42	-4
	3 IBS comorbid somatic	-3.369 [*]	.882	.004	-6.13	-
	4 IBS multicomorbid	-9.143 [*]	.702	<.001	-11.34	-6
	6 Control mental	-6.966 [*]	.830	<.001	-9.57	-4
	7 Control somatic	-4.953 [*]	.854	<.001	-7.63	-2
	8 Control multicomorbid	-8.615 [*]	.839	<.001	-11.24	-5
6 Control mental	1 IBS alone	4.517*	.704	<.001	2.31	6
	2 IBS comorbid mental	.646	.742	1.000	-1.68	2
	3 IBS comorbid somatic	3.598*	.939	.004	.65	6
	4 IBS multicomorbid	-2.176	.771	.138	-4.60	
	5 Healthy control	6.966*	.830	<.001	4.37	9
	7 Control somatic	2.013	.912	.772	85	4
	8 Control multicomorbid	-1.649	.898	1.000	-4.46	1
7 Control somatic	1 IBS alone	2.503 [*]	.733	.019	.21	4
	2 IBS comorbid mental	-1.367	.769	1.000	-3.78	1
	3 IBS comorbid somatic	1.584	.960	1.000	-1.43	4

		4 IBS multicomorbid	-4.190*	.797	<.001	-6.69	-1.69
		5 Healthy control	4.953*	.854	<.001	2.28	7.63
		6 Control mental	-2.013	.912	.772	-4.87	.85
		8 Control multicomorbid	-3.662*	.920	.002	-6.55	78
	8 Control multicomorbid	1 IBS alone	6.165 [*]	.715	<.001	3.92	8.41
		2 IBS comorbid mental	2.295	.752	.066	06	4.65
		3 IBS comorbid somatic	5.247 [*]	.947	<.001	2.28	8.21
		4 IBS multicomorbid	527	.781	1.000	-2.98	1.92
		5 Healthy control	8.615*	.839	<.001	5.99	11.24
		6 Control mental	1.649	.898	1.000	-1.17	4.46
		7 Control somatic	3.662 [*]	.920	.002	.78	6.55
PHQ-9 1 IBS alone	1 IBS alone	2 IBS comorbid mental	-4.455*	.563	<.001	-6.22	-2.69
		3 IBS comorbid somatic	-2.946*	.861	.018	-5.64	25
		4 IBS multicomorbid	-8.582*	.610	<.001	-10.50	-6.67
		5 Healthy control	3.064*	.702	<.001	.86	5.26
		6 Control mental	-6.702*	.790	<.001	-9.18	-4.22
		7 Control somatic	-4.078*	.816	<.001	-6.64	-1.52
		8 Control multicomorbid	-7.618*	.803	<.001	-10.13	-5.10
	2 IBS comorbid mental	1 IBS alone	4.455*	.563	<.001	2.69	6.22
		3 IBS comorbid somatic	1.508	.898	1.000	-1.31	4.33
		4 IBS multicomorbid	-4.128*	.663	<.001	-6.20	-2.05
		5 Healthy control	7.518*	.748	<.001	5.17	9.86
	6 Control mental	-2.248	.831	.196	-4.85	.36	
		7 Control somatic	.377	.855	1.000	-2.30	3.06
		8 Control multicomorbid	-3.163*	.843	.005	-5.81	52
	3 IBS comorbid somatic	1 IBS alone	2.946*	.861	.018	.25	5.64

	2 IBS comorbid mental	-1.508	.898	1.000	-4.33	1.3
	4 IBS multicomorbid	-5.636*	.929	<.001	-8.55	-2.7
	5 Healthy control	6.010*	.991	<.001	2.90	9.1
	6 Control mental	-3.756*	1.056	.011	-7.07	4
	7 Control somatic	-1.131	1.075	1.000	-4.50	2.2
	8 Control multicomorbid	-4.672*	1.065	<.001	-8.01	-1.3
4 IBS multicomorbid	1 IBS alone	8.582*	.610	<.001	6.67	10.
	2 IBS comorbid mental	4.128*	.663	<.001	2.05	6.2
	3 IBS comorbid somatic	5.636*	.929	<.001	2.72	8.5
	5 Healthy control	11.646*	.784	<.001	9.19	14.
	6 Control mental	1.880	.864	.837	83	4.
	7 Control somatic	4.504*	.887	<.001	1.72	7.2
	8 Control multicomorbid	.964	.875	1.000	-1.78	3.7
5 Healthy control	1 IBS alone	-3.064*	.702	<.001	-5.26	8
	2 IBS comorbid mental	-7.518*	.748	<.001	-9.86	-5.
	3 IBS comorbid somatic	-6.010*	.991	<.001	-9.12	-2.
	4 IBS multicomorbid	-11.646*	.784	<.001	-14.10	-9.
	6 Control mental	-9.766*	.931	<.001	-12.68	-6.
	7 Control somatic	-7.141*	.953	<.001	-10.13	-4.
	8 Control multicomorbid	-10.681*	.941	<.001	-13.63	-7.
6 Control mental	1 IBS alone	6.702*	.790	<.001	4.22	9.:
	2 IBS comorbid mental	2.248	.831	.196	36	4.8
	3 IBS comorbid somatic	3.756*	1.056	.011	.45	7.0
	4 IBS multicomorbid	-1.880	.864	.837	-4.59	.8
	5 Healthy control	9.766*	.931	<.001	6.85	12.
	7 Control somatic	2.625	1.019	.286	57	5.8

		8 Control multicomorbid	916	1.009	1.000	-4.08	2.25
	7 Control somatic	1 IBS alone	4.078*	.816	<.001	1.52	6.64
		2 IBS comorbid mental	377	.855	1.000	-3.06	2.30
		3 IBS comorbid somatic	1.131	1.075	1.000	-2.24	4.50
		4 IBS multicomorbid	-4.504*	.887	<.001	-7.29	-1.72
		1 IBS alone 2 IBS comorbid mental 3 IBS comorbid somatic	7.141*	.953	<.001	4.15	10.13
			-2.625	1.019	.286	-5.82	.57
		8 Control multicomorbid	-3.540*	1.029	.017	-6.77	31
	8 Control multicomorbid	1 IBS alone	7.618*	.803	<.001	5.10	10.13
		2 IBS comorbid mental	3.163*	.843	.005	.52	5.81
		3 IBS comorbid somatic	4.672*	1.065	<.001	1.33	8.01
		4 IBS multicomorbid	964	.875	1.000	-3.71	1.78
		5 Healthy control	10.681*	.941	<.001	7.73	13.63
		6 Control mental	.916	1.009	1.000	-2.25	4.08
		1 IBS alone 2 IBS comorbid mental 3 IBS comorbid somatic 4 IBS multicomorbid 5 Healthy control 6 Control mental 8 Control multicomorbid 1 IBS alone 2 IBS comorbid mental 3 IBS comorbid somatic 4 IBS multicomorbid 5 Healthy control 6 Control mental 7 Control somatic 2 IBS comorbid mental 3 IBS comorbid mental 7 Control somatic 4 IBS multicomorbid 5 Healthy control 6 Control mental 7 Control somatic 4 IBS multicomorbid 5 Healthy control 6 Control mental 7 Control somatic 8 Control mental 7 IBS alone 3 IBS comorbid somatic 4 IBS multicomorbid	3.540*	1.029	.017	.31	6.77
HQ-15	1 IBS alone	2 IBS comorbid mental	-2.603 [*]	.607	<.001	-4.51	70
		3 IBS comorbid somatic	-5.336 [*]	.926	<.001	-8.24	-2.43
		4 IBS multicomorbid	-8.211 [*]	.665	<.001	-10.30	-6.12
		5 Healthy control	7.327*	.752	<.001	4.97	9.68
		6 Control mental	.598	.851	1.000	-2.07	3.27
		7 Control somatic	-4.585 [*]	.918	<.001	-7.46	-1.71
		8 Control multicomorbid	-4.589*	.871	<.001	-7.32	-1.86
	2 IBS comorbid mental	1 IBS alone	2.603*	.607	<.001	.70	4.51
		3 IBS comorbid somatic	-2.733	.968	.137	-5.77	.30
		4 IBS multicomorbid	-5.608 [*]	.722	<.001	-7.87	-3.34
		5 Healthy control	9.930*	.802	<.001	7.41	12.45

	6 Control mental	3.201*	.896	.011	.39	6.02
	7 Control somatic	-1.982	.959	1.000	-4.99	1.0
	8 Control multicomorbid	-1.986	.915	.847	-4.85	.88
3 IBS comorbid somatic	1 IBS alone	5.336 [*]	.926	<.001	2.43	8.2
	2 IBS comorbid mental	2.733	.968	.137	30	5.7
	4 IBS multicomorbid	-2.876	1.005	.122	-6.03	.28
	5 Healthy control	12.663 *	1.064	<.001	9.33	16.0
	6 Control mental	5.933 [*]	1.136	<.001	2.37	9.5
	7 Control somatic	.751	1.187	1.000	-2.97	4.4
	8 Control multicomorbid	.747	1.151	1.000	-2.86	4.3
4 IBS multicomorbid	1 IBS alone	8.211 [*]	.665	<.001	6.12	10.
	2 IBS comorbid mental	5.608 [*]	.722	<.001	3.34	7.8
	3 IBS comorbid somatic	2.876	1.005	.122	28	6.0
	5 Healthy control	15.539 [*]	.847	<.001	12.88	18.
	6 Control mental	8.809*	.936	<.001	5.87	11.
	7 Control somatic	3.627*	.997	.008	.50	6.7
	8 Control multicomorbid	3.622*	.954	.004	.63	6.6
5 Healthy control	1 IBS alone	-7.327 [*]	.752	<.001	-9.68	-4.9
	2 IBS comorbid mental	-9.930 [*]	.802	<.001	-12.45	-7.4
	3 IBS comorbid somatic	-12.663 [*]	1.064	<.001	-16.00	-9.3
	4 IBS multicomorbid	-15.539 [*]	.847	<.001	-18.19	-12.
	6 Control mental	-6.730 [*]	.999	<.001	-9.86	-3.6
	7 Control somatic	-11.912 [*]	1.057	<.001	-15.23	-8.6
	8 Control multicomorbid	-11.916 [*]	1.016	<.001	-15.10	-8.7
6 Control mental	1 IBS alone	598	.851	1.000	-3.27	2.0
	2 IBS comorbid mental	-3.201 [*]	.896	.011	-6.01	3

		3 IBS comorbid somatic	-5.933 [*]	1.136	<.001	-9.50	-2.37
		4 IBS multicomorbid	-8.809 [*]	.936	<.001	-11.74	-5.87
		5 Healthy control	6.730 [*]	.999	<.001	3.60	9.86
		7 Control somatic	-5.182*	1.129	<.001	-8.72	-1.64
_		8 Control multicomorbid	-5.187 [*]	1.092	<.001	-8.61	-1.76
	7 Control somatic	1 IBS alone	4.585*	.918	<.001	1.71	7.46
		2 IBS comorbid mental	1.982	.959	1.000	-1.03	4.99
		3 IBS comorbid somatic	751	1.187	1.000	-4.47	2.97
		4 IBS multicomorbid	-3.627 [*]	.997	.008	-6.75	50
		5 Healthy control	11.912*	1.057	<.001	8.60	15.23
		6 Control mental	5.182 [*]	1.129	<.001	1.64	8.72
		8 Control multicomorbid	005	1.144	1.000	-3.59	3.58
	8 Control multicomorbid	1 IBS alone	4.589*	.871	<.001	1.86	7.32
		2 IBS comorbid mental	1.986	.915	.847	88	4.85
		3 IBS comorbid somatic	747	1.151	1.000	-4.36	2.86
		4 IBS multicomorbid	-3.622*	.954	.004	-6.61	63
		5 Healthy control	11.916*	1.016	<.001	8.73	15.10
		6 Control mental	5.187 [*]	1.092	<.001	1.76	8.61
		7 Control somatic	.005	1.144	1.000	-3.58	3.59

^{*} The mean difference is significant at the 0.05 level.

Table 11. Group comparisons, BTQ (Chi-square)

		sample 676)		lone 190)	IBS con mer (n =		IBS con som (n =	atic	IBS n come (n =		cont	Ithy trols : 64)	Cont me (n =		Cont som (n =		Con mer + sor (n =	ntal natic	χ2 †	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
BTQ, n (%)	268	408	58 (30.5)	132 (69.5)	48 (42.5)	65 (57.5)	13 (30.2)	30 (69.8)	55 (56.1)	43 (43.9)	18 (28.1)	46 (71.9)	31 (57.4)	23 (42.6)	14 (28.6)	35 (71.4)	29 (55.8)	23 (44.2)	38.31 ***	

[†] Comparisons between groups performed through Chi-square analysis.

BTQ = Brief Trauma Questionnaire (report of at least one traumatic event).

^{***}p < .001.

Table 12. Pearson correlations between study questionnaires

Total sample

	IBS-SSS	вто	FIQ	MFI – general fatigue	MFI – physical fatigue	MFI – reduced activity	MFI – reduced motivation	MFI – mental fatigue	GAD7	PHQ9
IBS-SSS	1									
BTQ	.014	1								
FIQ	.338***	.173***	1							
MFI – general fatigue	.358***	.152***	.678***	1						
MFI – physical fatigue	.318***	.120**	.674***	.801***	1					
MFI – reduced activity	.250***	.212***	.642***	.687***	.734***	1				
MFI – reduced motivation	.266***	.168***	.591***	.639***	.629***	.698**	1			
MFI – mental fatigue	.245***	.139***	.560***	.612***	.561***	.615**	.565***	1		
GAD7	.272***	.238***	.618***	.526***	.453***	.509**	.553***	.551***	1	
PHQ9	.290***	.226***	.712***	.665***	.590***	.657**	.679***	.656***	.776***	1
PHQ15	.517***	.161***	.731***	.606***	.580***	.532**	.527***	.503***	.610***	.679***

^{**}p < .01.

^{***}p < .001.

Table 13. Pearson correlations between study questionnaires

IBS group

(IBS alone + IBS comorbid mental + IBS comorbid somatic + IBS multicomorbid)

	IBS-SSS	вто	FIQ	MFI – general fatigue	MFI – physical fatigue	MFI – reduced activity	MFI – reduced motivation	MFI – mental fatigue	GAD7	PHQ9
IBS-SSS	1									
вто	022	1								
FIQ	.387***	.185***	1							
MFI – general fatigue	.301***	.152***	.651***	1						
MFI – physical fatigue	.277***	.140***	.652***	.779***	1					
MFI – reduced activity	.238***	.226***	.637***	.662***	.726***	1				
MFI – reduced motivation	.211***	.160***	.569***	.625***	.625***	.693***	1			
MFI – mental fatigue	.201***	.144**	.539***	.590***	.533***	.592***	.528***	1		
GAD7	.258***	.222***	.587***	.485***	.417***	.473***	.505***	.514***	1	
PHQ9	.287***	.207***	.713***	.649***	.582***	.639***	.663***	.629***	.747***	1
PHQ15	.403***	.146**	.721***	.543***	.517***	.511***	.479***	.477***	.586***	.689***

^{**}p < .01.

^{***}p < .001.

Table 14. Pearson correlations between study questionnaires

Disease control group

(Control mental + control somatic + control mental+somatic)

	IBS-SSS	вто	FIQ	MFI – general fatigue	MFI – physical fatigue	MFI – reduced activity	MFI – reduced motivation	MFI – mental fatigue	GAD7	PHQ9
IBS-SSS	1									
вто	.083	1								
FIQ	.349***	008	1							
MFI – general fatigue	.236**	028	.546***	1						
MFI – physical fatigue	.224**	113	.648***	.747***	1					
MFI – reduced activity	.141	.092	.431***	.520***	.588***	1				
MFI – reduced motivation	.154	.120	.460***	.411***	.430***	.516***	1			
MFI – mental fatigue	.302***	004	.473***	.473***	.451***	.514***	.521***	1		
GAD7	.183*	.228**	.486***	.314***	.247***	.344***	.511***	.494***	1	
PHQ9	.239**	.208*	.515***	.467***	.364***	.486***	.569***	.596***	.755***	1
PHQ15	.502***	.160	.698***	.425***	.528***	.316***	.384***	.382***	.458***	.478***

^{*}p < .05

^{**}p < .01

^{***}p < .001.

Table 15. Pearson correlations between study questionnaires

Healthy controls

	IBS-SSS	вто	FIQ	MFI – general	MFI – physical	MFI – reduced	MFI – reduced	MFI – mental	GAD7	PHQ9
				fatigue	fatigue	activity	motivation	fatigue		
IBS-SSS	1									
ВТО	.123	1								
FIQ	.097	.260*	1							
MFI – general fatigue	.234*	.268*	.404***	1						
MFI – physical fatigue	.123	.257*	.226	.709***	1					
MFI – reduced activity	.205	.116	.186	.632***	.661***	1				
MFI – reduced motivation	.311**	.107	.353**	.648***	.492***	.703***	1			
MFI – mental fatigue	.198	.195	.128	.524***	.438***	.461***	.411***	1		
GAD7	.097	.204	.541***	.463***	.370***	.227	.344**	.391***	1	
PHQ9	.137	.193	.343**	.556***	.469***	.448**	.441***	.566***	.728***	1
PHQ15	.246*	.099	.605***	.663***	.430***	.307**	.419***	.318**	.708***	.604***

^{*}p < .05

^{**}p < .01

^{***}p < .001.