The National Health Service (NHS) in the UK is faced with increasing costs. This study aimed to estimate admission costs and primary care prescribing costs associated with the treatment of IBS in England.

**Results**

**Outpatient attendance and tariff costs**
- During 2012/2013, there were 1,219,961 outpatient appointments in gastroenterology and colorectal surgical specialties, with a total cost of £365,868,937.
- Despite this, only 1982 patients were recorded with IBS-specific codes, with a total estimated tariff cost of £812,335 (Table 3).
- In addition, 28,849 patients were recorded with IBS-related symptom codes at a cost of £11,002,874 (Table 3).
- The total tariff cost of outpatients coded with IBS or related symptoms was £11,815,209 (Table 3).

**Hospital admissions and tariff costs**
- During 2012/2013, the total number of patients admitted to gastroenterology and colorectal surgical specialties was 116,307 at a total cost of £95,692,068.
- Overall, 918 patients were coded (in the primary diagnostic position) as having IBS with diarrhoea and 2599 as having IBS without diarrhoea, at tariff costs of £824,897 and £1,959,408, respectively (Table 4).
- In addition, 112,790 patients were coded (in the primary diagnostic position) with IBS-related symptoms, at a tariff cost of £92,907,764 (Table 4).

**Conclusions**
- Despite being poorly clinically coded, it is clear that IBS places a significant cost burden on the NHS.
- Notably, 49% of patients seen for inpatient and outpatient lower GI endoscopies had no further activity provided by the Hospital Provider Trust as either an inpatient or outpatient over the subsequent 12 months, implying functional symptoms.
- Better diagnosis and subsequent management of IBS within a primary care setting may provide direct savings in the cost of IBS management.

**Diagnostic lower GI endoscopies**
- During 2011/2012 there were 658,698 diagnostic lower GI endoscopies performed in outpatient and day case settings at a tariff cost of £169,676,704.
- Of these, 332,752 endoscopies (49%) had no further follow-up either as an inpatient or outpatient by the Hospital Provider Trust in the 12 months following their endoscopies.
- There was also a 13.5% increase in inpatient and outpatient diagnostic endoscopies, from 606,432 during 2010/2011 to 681,541 during 2012/2013.

**Primary care prescribing patterns and costs**
- PACT data indicated that, of the selected items, 5,552,850 laxative items and 1,930,736 antispasmodic items were prescribed by GPs during 2012/2013 (Figure 1).
- Overall, £44,977,959 was spent on selected laxatives commonly used to treat IBS in primary care. Of the selected laxatives, the most money was spent on prescribing macrogol, at a cost of £40,219,270.
- Overall, £25,582,752 was spent on selected antispasmodics commonly used to treat IBS in primary care. Of the selected antispasmodics, the most money was spent on prescribing mebeverine, at a cost of £11,024,948.

**References**

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**Disclosures**
Mark Rance is an employee of Almirall UK.