nerva®

Patient case study: Resolving IBS symptoms through gut-brain therapy

A structured, app-based approach led to symptom relief, dietary expansion, and long-term self-regulation.



"We were building a system she could use long term – food, fiber, and brain-gut tools working together."

Cherie Stanley, Dietitian

89%

Patient's bloating reduction after completing Nerva

When the Sunshine Coast Gut Clinic set out to test how digital gut-directed hypnotherapy could work in everyday practice, the goal wasn't radical reinvention – it was practical integration. Could brain-gut therapies be delivered simply, within existing workflows, and make a measurable difference?

Key takeaways

- Brain-gut therapies can support dietary expansion
 The patient had only partial relief on a low FODMAP diet. Once
 gut-brain dysregulation was addressed, she successfully
 reintroduced 10 of 12 FODMAP groups and liberalized her intake.
- Clear framing and structure improve adherence
 Rather than recommending the app passively, the dietitian
 demonstrated it live, explained the rationale, and built it into the
 patient's routine increasing buy-in and completion.
- Symptom improvement requires nervous system regulation Bloating, urgency, and nausea resolved only after incorporating brain-gut therapy. Without calming the system, further dietary interventions would likely have failed.
- The approach complements existing care models

 Brain-gut strategies can be layered into routine care, whether
 medical, dietetic, or psychological, without referral delays or
 workflow disruption.

Clinical context: Integrating gutbrain care in practice

The Sunshine Coast Gut Clinic joined a Nerva pilot study assessing how digital gut-directed hypnotherapy could be used in day-to-day IBS care. Clinicians trialed referring Nerva's six-week digital program in patients with functional GI symptoms, many of whom had comorbid anxiety, sleep issues, or chronic pain.

One participant, a woman in her 40s, presented with abdominal pain, bloating, and loose, urgent stools, particularly severe in the morning. She had attempted dietary changes independently using the Monash University dietary app, including a self-guided low FODMAP elimination process. While she adhered to the protocol, symptoms persisted, and she remained highly anxious about food and symptom unpredictability at work.

Her central question: "Is this how I have to eat forever?"

Intervention: Structured introduction of brain-gut therapy

Dietitian Cherie Stanley, who managed this case, opted to introduce the Nerva app early rather than intensify dietary restrictions. She positioned it as a way to address nervous system overactivation, reframing the problem from purely dietary to gut-brain dysregulation, shifting the patient's focus from food avoidance to nervous system regulation.

Key intervention elements included

• Live demonstration: Playing the Nerva app introduction during the session to normalize the tool and explain its mechanism of action.

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- Supportive dietary changes: Instead of additional elimination, the plan included:
 - Switching from coffee to a chicory-based alternative
 - Gradual introduction of psyllium husk
 - Replacing insoluble fibers with gentle, soluble options
 - Designing a school-day routine (the patient is a teacher) that reduced stress and urgency

"She needed structure – something that felt manageable and made sense clinically. Nerva became part of that structure"

Outcomes: Reduced symptoms and increased flexibility

Symptoms	Baseline	results	After intervention
Abdominal bloating		64	7
Abdominal pain		67	38
Nausea		55	0
Overall GI symptoms		50	20
Passage of wind		58	35

Bloating, which can often the most resistant symptom, improved dramatically for the patient. Nausea resolved completely. Abdominal pain and urgency decreased to levels that no longer interfered with her daily life.

Crucially, Cherie reported that the patient's interpretation of flare-ups changed and she began to recognize stress-related patterns, which reduced anxiety and reactivity.



Long-term gains: Food reintroduction and resilience

With symptoms stabilized, the patient began reintroducing FODMAPs under Cherie's clinical guidance. She successfully tolerated 10 of 12 categories – a result attributed in part to nervous system downregulation via the brain-gut intervention.

She also continued using the Nerva app beyond the structured six-week program. While not needed nightly, she returned to it during periods of elevated stress, such as school term endings, travel, or illness, demonstrating durable self-management skills.

"We weren't just resolving symptoms. "We were building a system she could use long term – food, fiber, and brain-gut tools working together."

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Provider insights

• Introduce brain-gut therapies early

They are particularly effective when used before patients become highly restricted, demoralized, or

overly focused on food as the sole problem.

• Don't refer and forget

Rather than suggest tools like Nerva as an optional extra, clinicians can embed usage into care plans with clear rationale, guidance, and follow-up.

- Treat the system, not just the symptoms
 Without addressing the nervous system, dietary
 strategies may plateau. Calming the gut-brain axis
 can unlock further clinical progress.
- Cross-disciplinary fit

Brain-gut approaches can be integrated by Gls, GPs, dietitians, nutritionists, psychologists, naturopaths, and nurse practitioners alike – fitting into varied clinical contexts with minimal disruption.

Why this matters for clinical care

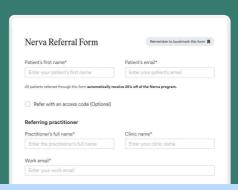
For clinicians supporting patients with chronic GI symptoms, digital brain-gut therapies are not just convenient, they are clinically powerful. This case demonstrates how structured, integrated use of a gut-directed hypnotherapy app helped reduce symptom burden, ease food fears, and support dietary diversity.

"It's not just about calming the gut. It's about equipping people with tools they can keep using – to reduce fear, restore control, and get their lives back."

Make brain-gut support part of your care model

Whether you see just a few patients each week or 10+ who could benefit from braingut support, Nerva's digital program can be seamlessly integrated into your existing approach.

The best way to get patients started is via the online referral form: it's quick, easy, and adds no administrative burden. Plus, your patients receive a **25% discount on 1-year subscriptions** when referred via the form.



Refer now

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