



Diet and IBD

Patient Information Sheet

Although there is no evidence that diet is the cause of inflammatory bowel disease (IBD), some people have found certain foods seem to make their symptoms worse. By cutting out certain foods types many patients have noticed an improvement in their symptoms and a reduction in the frequency of flare ups. It may be worth experimenting on your own, but remember how important it is to keep up a balanced diet, and don't make any drastic changes without consulting your doctor.

For effective nutrition therapy the individualised requirements of each patient needs to be considered. Physicians and patients are encouraged to work together to develop an individualized eating plan. For this, Several questions should be asked when designing an individualised eating plan. Advice is tailored depending on whether the condition is Crohn's disease or Ulcerative colitis, which sections of the digestive tract are affected, whether you are having an acute flare up or whether you are in remission, medications, nutritional intolerances and disease complications.

Adapting your diet to different disease phases

Food does not cause IBD. However, during a flare-up, certain foods can exacerbate symptoms. Common sensitivities include dairy and wheat intolerance.

In general we find a high fluid intake of at least 2L a day with a low residue (high soluble fibre) diet helpful, both during flares and when patients are on remission as IBS like symptoms are common in IBD (60% of UC and 40% of Crohn's patients).

Malnutrition

Is uncommon, but can be seen in small bowel Crohn's disease or in those who have undergone recurrent surgery.

Fibre and IBD

Fibre is important in UC and Crohn's in different ways:

Crohn's

Taking a normal balanced diet can be difficult for people with Crohn's.

1) Strictures or narrowing of the small intestine as a result of the inflammation and thickening of the bowel wall. Fibrous food can have difficulty passing through these narrow parts of the intestine and pain is caused as the intestinal muscle contracts to push the food through.

2) Pain can also be caused because the contraction of inflamed intestine is more vigorous than with normal intestine. Cutting down on insoluble fibre (roughage) containing foods may be helpful to ease some of these problems (see Low residue diet). Although fruits and vegetables are high in fibre, these are predominantly soluble fibres, and it is important to include these food types in your diet. Cutting off anything that comes through whole and removing things like the skins, seeds and stalks can be a good way of providing additional comfort. Ask your healthcare team if you can be referred to a dietician for further advice.

Ulcerative Colitis

There may be concern about taking fibre in the diet, because of powerful urges to go to the toilet (and associated fears of having an 'accident'). This almost uncontrollable urge to open the bowels is caused primarily by inflammation in the lower colon rather than by fibre in the food. However, fibre adds bulk to faeces and can trigger the need to open the bowels. During flare ups it may be helpful to reduce fibre intake. If you develop constipation / IBS related symptoms (as seen in 60%) you may gain benefit from a high fluid intake with a low residue diet +/- Movicol 1 sachet twice a day.

Nutrients that are especially critical and foods that contain them

Nutrients	Foods
Vitamin A	Milk, eggs, cereals, spinach, tomatoes, carrots, peppers, apricots, peaches
Vitamin B12	Red meat, eggs, poultry, fish, dairy products, soy products
Vitamin C	Citric fruits, red berries, Kiwi, peppers, tomatoes, broccoli, spinach
Vitamin D	Dairy products, egg yolks, fish oils, sunflower seeds, (sun exposure)
Vitamin K	Liver, beef, chicken, cheese, wheat bran, not its, green leafy vegetables, plums
Folate	Citric fruits, beans, peas, liver, yeast breads, peanuts, spinach, dark greens

Nutrients	Foods
Iron	Red meats, liver, poultry, fish, shellfish, green vegetables, dried fruits, lentils, beans,
Magnesium	Wheat bran, rolled oats, peanut butter, nuts and seeds, dairy products, berries, banana
Calcium	Dairy products, leafy greens, lots, soy products, orange juice, some cereals
Potassium	Broccoli, spinach, lagoons, beans, peas, dried fruits, bananas, grapes, citric fruits
Zinc	Brewers yeast, egg yearbooks, fish, red meats, mushrooms, seafood, whole grain

Prebiotics, Probiotics & Synbiotics

The data is still mounting as to whether or not any of the over the counter preparations are of any benefit in patients with inflammatory bowel disease. There is certainly no harm in trying these various products as you may personally find them beneficial. Presently however there is not enough data to support their regular use.

Alternatives

There is some data to support the use of aloe vera both in the acute and quiescent stages. as