



# Nutrition and diet

## Does diet affect IBD?

IBD is not caused by having a 'bad diet'. Most people with IBD find that what they eat affects how they feel and also affects their IBD symptoms. A nutritious and varied diet is beneficial to help maintain overall good health and good gut health and support healing.

When IBD is in remission, this means eating a diet rich in plant foods (e.g. vegetables, fruits, grain-based foods, nuts and seeds etc.) plus high protein foods such as fish, chicken, small amounts of red meat, eggs, soy-based protein like tofu and tempeh, legumes, yoghurt, cheese and milk.

It is probably beneficial to minimise (eat small amounts or only occasionally) foods that are highly processed and contain artificial additives.

## Is it true that milk will make the symptoms of IBD worse?

Animal milks (from cows, sheep, goats etc.) contain a natural sugar called lactose. A small number of people cannot digest the lactose in milk and cream because their gut does not produce enough of the enzyme lactase, which breaks down the lactose sugar. Lactose that is not broken down by the lactase enzyme can lead to diarrhoea, cramping, abdominal pain, gas and bloating.

Temporary lactose intolerance can occur during active small bowel Crohn's disease, although the intolerance often goes away after the inflammation is treated. Most people who are lactose intolerant can still tolerate small amounts of liquid dairy products (e.g. milk in their tea) and usually

tolerate hard cheese and butter because they contain very little lactose. Lactose-free dairy products are now widely available and it is also possible to purchase lactase enzyme capsules or drops to help with digestion.

Dairy products are high in protein and an important source of dietary calcium for most New Zealanders. If you do not eat dairy products, choose plant-based alternatives that are calcium fortified. This is particularly important for children whose bones are still growing.

### Does resting the intestine help the inflammation?

Resting the bowel by having periods of starvation may be harmful as this can lead to malnutrition. A malnourished body responds less well to IBD treatments and can make symptoms such as fatigue worse.

Specialised liquid nutrition formulas can be helpful if you struggle to eat enough during a disease flare. They provide nutrients that are easy to absorb and help provide the nutrition your body needs without having to eat as much solid food. These are available on prescription from your specialist, GP or dietitian.

### Is it helpful to eat more or less fibre than usual in the diet?

A low fibre diet, which limits the amount of bulk in the diet, is often used when there is active disease in the large bowel or terminal ileum (last part of the small intestine) to help control symptoms of diarrhoea, bloating and abdominal cramping.

As discussed below, most people with IBD can eat a normal or near-normal diet without making diarrhoea or pain worse. The usefulness of the strict, traditional 'low residue' diet is now seriously questioned, though it is recognised that eating a lot of fruit can make diarrhoea worse, just as it can cause diarrhoea in healthy people. For this reason, a normal nutritious diet is recommended unless particular foods appear to cause unpleasant symptoms.

For people with Crohn's disease with small bowel strictures (narrowing), it is advisable to reduce highly fibrous foods that may cause blockages and abdominal cramping. Discuss this with your dietitian or specialist.

For those with ulcerative colitis, a high fibre diet, possibly including fibre supplements, can be useful to improve gastrointestinal symptoms and decrease disease activity. Fibre supplements that have shown positive effects include psyllium husk (e.g. Konsyl-D, Metamucil), oat bran and germinated barley. Increasing fibre in the diet should always be done gradually to give your gut



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time to adjust and it is important to drink plenty of fluids as well to avoid becoming constipated.

## Is alcohol harmful?

There is no evidence that alcohol taken in moderation makes IBD worse. Some healthy people notice bowel looseness after drinking alcohol, and people with IBD may notice the same thing.

People on medication for their IBD and other health issues problems should consult their doctor or pharmacist to ensure that alcoholic beverages do not interfere with the metabolism of their medication or cause additional side effects.

## Do particular foods cause diarrhoea?

Watery, frequent bowel motions are due to the failure of the intestine to absorb fluid and nutrients properly. Even healthy people without IBD can experience diarrhoea after some foods e.g. very spicy or fatty foods, excessive fruit or beer. While such foods may cause diarrhoea in people with IBD, it is doubtful if any of them do harm by triggering inflammation. If you notice that particular foods may cause diarrhoea, try eating a smaller portion of those foods rather than completely avoiding them.

For some people with Crohn's disease, the small intestine may not be able to absorb fat normally and even a moderate amount of fat in or added to food may cause diarrhoea. This occurs due to bile acid malabsorption. There are medications that can help to improve diarrhoea due to fat and bile acid malabsorption.

Fat is an important nutrient for the body and your diet needs to include fat to be able to absorb fat soluble vitamins (vitamins A, D, E, K). If you experience fat intolerance or persistent, watery diarrhoea when your IBD is in remission, speak to your specialist or dietitian for further guidance.

## Do particular foods cause pain?

Abdominal pain can have many causes. For example, it can be due to trapped wind, gynaecological causes (for women), bowel inflammation, constipation, a stomach bug/gastroenteritis, irritable bowel syndrome or intestinal strictures. Whether or not food contributes to pain may depend on what is causing the pain.

If you experience gastrointestinal symptoms that cause pain even when your IBD is in remission, you may benefit from a dietitian's assessment and advice to determine whether diet is contributing to the pain. Many people (~30%) with IBD also have irritable bowel symptoms when their IBD is in remission and may respond to dietary changes.

Abdominal cramps may occur when there is a stricture (narrowing) of the intestine. Foods that do not breakdown easily, such as meat gristle, fibrous/stringy vegetables, tough fruit, vegetable skins, dried fruits, mushrooms or whole nuts, may cause pain if they get stuck at the narrowing. The intestine will then forcefully contract to try and push the food through the narrowed area.

When one or more narrowed areas of intestine are present, as may happen in Crohn's disease, pain may be relieved by eating smaller meals more often and avoiding foods that are hard to digest.

## Do particular foods cause excessive amounts of wind or flatulence?

Flatulence (wind) arises from bacterial fermentation of poorly digested foods as they move through the gastrointestinal tract. Flatulence is normal and it is a sign of a healthy gut.

However, if you experience a lot of flatulence or have pain or bloating associated with flatulence, some particular foods that you may not be absorbing well can make these symptoms worse.



A dietitian can often help you find which foods may be causing your symptoms as well as giving guidance on a balanced diet.

### Can inflammation affect the body's need for food?

During periods of active inflammation, the body requires a higher amount of protein than usual to help with healing, but it is common to have a poor appetite or not feel like eating as much as normal.

Nutrition supplement drinks can be useful at this time as they are a rich source of many nutrients and contain easy-to-digest protein. Other high protein foods include eggs, fish, chicken, meat, nuts and nut butters, soy products such as tofu/tempeh, milk, yoghurt and cheese.

### Can diarrhoea increase the body's need for fluid?

If watery stools are passed several times a day, the body needs more fluid and salt than usual. Usually drinking more and eating some salty food is enough.

However, other treatments may be advised if fluid losses are very high. A special solution of salt and glucose (or sugar) in water

can be prescribed or purchased from a pharmacy. These can be kept on hand for water and salt replacement if diarrhoea is excessive.

### Can an abnormality of the small intestine affect the body's supply of food?

Most of the nutrients in food are absorbed in the small intestine. Active small bowel Crohn's disease inflammation can affect absorption of food and nutrients. Past surgery can also reduce the length of small intestine available to absorb nutrients from food.

### Are vitamin and other supplements helpful?

People with IBD do not always absorb all nutrients in food properly due to inflammation, diarrhoea or intestinal surgery. For this reason, there is a slightly higher chance of developing specific nutrient deficiencies than in the general population.

Therefore, it's a good idea to have annual blood tests with your GP or specialist to check for key nutrients (e.g. vitamin B12, folate, iron, vitamin D). While taking vitamin/mineral supplements 'just in case' can





sound like a good idea, high doses of some nutrients may interfere with the absorption of others, so you should discuss this with your healthcare team.

### What should I do when I have a flare?

If you think you might be having a flare of inflammation, first contact your GP or your IBD nurse. When having a flare, your gut may not be absorbing enough nutrients due to inflammation and diarrhoea. Unless there is a blockage of the intestines, small, frequent, nutritious meals can sometimes help. A nutritional supplement, such as Sustagen, Fortisip or Ensure, might also be needed to maintain nutrition and reduce the volume of diarrhoea.

Nutrition treatments can sometimes be used to treat a flare of Crohn's disease. The most commonly used treatment is six to eight weeks of exclusive enteral nutrition (EEN). Exclusive enteral nutrition involves drinking only a nutrition supplement multiple times per day instead of eating and drinking the usual foods and fluids. Speak with your specialist, IBD nurse or dietitian to find out more about this treatment.

## Conclusion

For most people with IBD, the best advice is to eat a nutritious diet that includes lots of plant foods and minimises highly processed foods. Keep dietary restrictions to a minimum. Eating a limited variety of foods increases the likelihood of becoming deficient in certain nutrients and can also impact your ability to socialise with friends and family.

If you are concerned about aspects of your diet, struggle to eat a varied diet, or continue to have gastrointestinal symptoms even when your IBD is in remission, ask your specialist, IBD nurse or GP for a referral to a dietitian.