Dietary Management of Inflammatory Bowel Disease

Crohn’s disease and chronic ulcerative colitis are two diseases that are together classified as inflammatory bowel disease (IBD), and result in an inflammation of the intestines. During an “attack” symptoms may include abdominal pain, nausea and vomiting, frequent bowel movements, diarrhea, weight loss, dehydration, anemia and fever. These factors contribute to a loss of appetite in many individuals. In addition, IBD, particularly Crohn's disease, is often associated with poor digestion and absorption of dietary protein, fat, carbohydrates, water, and a wide variety of vitamins and minerals. Thus, much of what a person eats may never really get into the body. Therefore, while dietary habits do not cause the disease, they do play a crucial role in managing it.

While there is not one “IBD diet” for everyone, you can work with your registered dietitian to develop an eating plan that will help manage symptoms during the acute phases of a flare up, help determine what types of foods may exacerbate symptoms, and help resume a healthy eating plan that will promote recovery during “remissions.”

**Dietary Tips to Help Manage IBD:**

- Eat small, frequent meals and snacks instead of just a few large meals. Even during a flare up, eating adequate high protein foods such as lean meats, fish, poultry and eggs (or egg substitutes) may help relieve IBD symptoms.
- Don’t skip meals – this may cause pain and bloating when you finally do eat.
- Slow down when you eat – take small bites and chew food well.
- Drink plenty of fluids – especially water - to keep your body hydrated (which can be a challenge during vomiting and diarrhea episodes) and prevent constipation.
- Take vitamin and/or mineral supplements as recommended by your doctor.
- When IBD is under control, try foods that are high in fiber. You might find that cooked vegetables more tolerable than raw. High fiber foods include:
  - Whole grain breads, bagels, buns, pasta
  - Bran cereals
  - Whole grains like barley, corn, brown rice, quinoa
  - Dried fruits, berries, oranges, apples and pears (with skins)
  - Green, leafy vegetables
- During a flare up, however, limit high fiber foods to help minimize symptoms.
- Limit gas-producing foods such as cruciferous vegetables (broccoli, cabbage, cauliflower, Brussels sprouts); dried peas, beans, legumes and lentils; onions, chives, peppers and carbonated beverages.
- If you are lactose intolerant, avoid lactose-containing (dairy) foods or try soy-based alternatives, lactase enzymes and lactase pretreated foods.
- Use pre-digested nutritional drinks (elemental diet) as recommended by your registered dietitian to give your bowel a rest and replenish lost nutrients.
- Avoid alcohol and caffeine as these stimulate the intestines and may exacerbate IBD symptoms. Sorbitol (sweetener used in foods) may also cause diarrhea.
• If you develop gas and diarrhea after eating fatty or greasy foods, then limit these foods in your diet: butter, margarine, mayonnaise, salad dressing, oil, high fat meats and dairy products, skin of poultry, fried foods, etc.
• New nutritional therapies being explored:
  o Fish and flaxseed oils, either in the diet or as supplements
  o Prebiotics such as psyllium (a complex carbohydrate)
  o Probiotics – lactobacillus preparations and live-culture yogurt

References:

Crohn’s and Colitis Foundation of America. Diet and nutrition. Available at: http://www.ccfa.org/info/diet?LMI=4.2

Diet and nutrition, Living with Crohn’s. Remicade: Infliximab. Available at: http://www.remicade.com/crohns/crohns_lifestyle/crohns_diet.jsp