

## Inflammatory Bowel Disease Diet Guidelines

Inflammatory bowel disease (IBD) is a term used to describe two diseases that cause the gastrointestinal (GI) tract to become inflamed: **Crohn's disease** and **ulcerative colitis**. Both can cause sores or ulcers to occur in the GI tract. This may affect how the body is able to absorb food or make it hard or painful to eat.

### Symptoms of IBD

- Abdominal pain
- Diarrhea with or without blood
- Fever
- Poor growth in children
- Weight loss
- Mouth ulcers
- Nausea and vomiting

### Why the Food You Eat Matters

The food you eat provides your body with the vitamins, minerals, protein and calories needed to grow and maintain your health. It is not easy for people with IBD to absorb the nutrients from the foods they eat; and, therefore, they need more vitamins, minerals, protein and calories than other people. They are more likely to have poor growth and be malnourished. They may eat less because they don't feel well or are afraid to eat because eating makes them feel worse.

### Foods You Should Eat

Strive for a balanced diet with foods from all food groups (grains, milk and milk substitutes, meat and meat substitutes, fruits, and vegetables). People with IBD need more protein. Sometimes a high calorie diet may be needed too.

The food you eat should be based on what you like and what your body can handle.

Lactose intolerance may happen with Crohn's disease, but some people do not have issues when eating dairy products.

Try eating smaller, more frequent meals and snacks (eating every 3-4 hours)

If it is painful to eat or you are losing weight, try supplements like Boost<sup>®</sup>, Ensure<sup>®</sup>, and Breakfast Essentials<sup>®</sup>.

Fluid needs are increased with chronic diarrhea and fever. Drink more fluids during flares (>= 8 cups per day).

When your disease is active, a low-fiber, low-fat diet may reduce symptoms.

### When IBD is active it may help to:

- Limit dairy that is high in lactose.
  - You might be able to handle yogurt with live active cultures or lactose-free yogurts.
  - You might be able to handle hard cheeses like cheddar and Swiss.
  - Try almond or coconut milk, lactose free milk (like Lactaid<sup>®</sup>) or use lactase pills.
- Limit fructose.
  - High amounts are found in fruit juice, soda, honey, and dried fruit.
- Limit sorbitol (used as sweetener, common in sugar free candies/chocolates).
- Limit high fat foods like butter, cream, red meats, chocolate, fried or fast foods.

- It may help to reduce high fiber foods like whole grains, beans, and fruits and vegetables **with** skin.
  - You might be able to handle fruits and vegetable with skins peeled off.
  - Lower fiber fruits include cantaloupe, honey dew, mandarin oranges, fruit cocktail, and applesauce. For veggies, try zucchini, yellow squash, and bell peppers.
  - Try well cooked vegetables and vegetable juice.
  - Try low fiber grain products like white bread, white rice and pasta and low fiber cereal and crackers.
- Caffeine, acidic foods, and alcohol may make flares worse.

It may help to keep a food log. Your dietitian can review your food log with you and help figure out food triggers as well as foods that may improve your symptoms.

### **Vitamins and Minerals**

You should take a complete multivitamin with minerals.

If you take steroids or limit your intake of dairy products, you should also take extra calcium (500 mg, 3 times per day) and vitamin D (800-1000 IU per day).

If you take sulfasalazine you may need to take folic acid.

Iron and vitamin B12 deficiencies are common with IBD, so you may need to have blood tests to measure these nutrients.

With prolonged diarrhea, you may also need magnesium, zinc, and potassium supplements. An electrolyte drink, such as

Drip Drop<sup>®</sup>, may help add these nutrients back into your body.

Check with your doctor if you are concerned about your nutrition.

### **Other Supplements for IBD**

Many supplements are marketed for inflammation. More testing still needs to be done. Some patients have found that these help maintain a healthy gut or reduce symptoms. Others do not see any changes in their symptoms.

**Prebiotics** are a type of fiber that helps keep the bowels healthy. These feed the “friendly” bacteria in the gut. Onions, garlic, bananas, asparagus, avocado, and some whole grain cereals are good food sources of this fiber.

**Probiotics** are living bacteria that keep your gut healthy. They are referred to as the “good germs.” You can find them in products like yogurt and the label will say “Live Active Cultures.” The brand, VSL #3 can help those with ulcerative colitis and pouchitis.

**Vitamin D:** Low Vitamin D may cause more severe IBD which puts patients at an increased risk for surgery, hospital stays, colon cancer, and C-diff infection. Taking a vitamin D supplement improves disease activity and quality of life.

**Marine fish oils and flaxseed oil** contain omega-3 fatty acids that may help IBD symptoms. If your body can handle fish, try eating fish like salmon, cod, and tuna several times a week. You can also find fish oil and flaxseed oil in capsule form.

**Turmeric or curcumin** can act as an anti-inflammatory. Eating the spice in food or a capsule form may be helpful if you have ulcerative colitis. Curcumin should be taken with food.

Talk to your doctor before starting any supplement.

To find out more about IBD, visit:

[www.cafa.org](http://www.cafa.org)

[www.iffgd.org](http://www.iffgd.org)

[www.naspghan.org/](http://www.naspghan.org/)

### **Who to Call**

If you are a UW Health patient and have more questions, please contact UW Health at the phone number listed below. You can also visit our website at [www.uwhealth.org/nutrition](http://www.uwhealth.org/nutrition).

Nutrition clinics for UW Hospital and Clinics (UWHC) and American Family Children's Hospital (AFCH) can be reached at: **(608) 890-5500**.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 2/2023 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#375.