

IBS guidelines



BY DR LINDA VON ZEUNER

- **Exclude gas producing foods that cause small intestinal bacterial overgrowth as much as possible. This includes:**
 - **Gluten**
 - **Dairy**
 - **Caffeine**
 - **Sugar**
 - **Alcohol**
- **Embrace a low FODMAP diet (see below)**
- **Take a probiotic daily (Florish, Rawbiotics)**
- **Fermented foods ie Kimchi, Kefir, Kombucha**
- **Meditation with deep abdominal breathing (even as little as 5 minutes daily)**
- **Mindful meals. No eating on the go, in a rush.**
- **Stress management: Exercise in nature, routine, life coaching**
- **FODMAP DIET:**

FODMAP stands for Fermentable Oligosaccharides, Disaccharides, Monosaccharides, and Polyols, which are short-chain carbohydrates and sugar alcohols that are poorly absorbed by the body, resulting in abdominal pain and bloating.

Some examples of high FODMAP foods are:

- **some vegetables and fruits,**
- **beans, lentils,**
- **wheat,**
- **dairy products with lactose,**
- **high fructose corn syrup, and**
- **artificial sweeteners**
- **Lactose:**
- **Patients with known lactose intolerance should be placed on a lactose-restricted diet. We also suggest an empiric trial of a lactose-free diet in patients who complain of persistent abdominal bloating despite exclusion of gas-producing foods. As improvement of symptoms does not necessarily imply lactose maldigestion,.**
- **Although the incidence of lactose malabsorption is not higher in patients with IBS, patients with IBS and lactose intolerance have an exaggerated symptom response to lactose ingestion [10]. Patients with undiagnosed lactose intolerance can have lasting clinical improvement when placed on a lactose-restricted diet**

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Why low FODMAP?

We suggest a diet low in fermentable oligo-, di-, and monosaccharides and polyols (FODMAPs) in patients with IBS with abdominal bloating or pain despite exclusion of gas-producing foods ([table 1](#)). These short-chain carbohydrates are poorly absorbed and are osmotically active in the intestinal lumen where they are rapidly fermented, resulting in symptoms of abdominal bloating and pain. A low FODMAP diet involves elimination of a larger number of high FODMAP foods that would not be excluded in a diet that only required avoidance of gas-producing foods (eg, foods that contain fructose, including honey, high-fructose corn syrup, apples, pears, mangoes, cherries, or oligosaccharides, including wheat). Low FODMAP dietary education should be provided by a trained dietician to avoid unnecessary dietary over-restriction and a nutritionally replete diet. Low FODMAP education consists of initially eliminating FODMAPs from the diet for six to eight weeks and then, following symptom resolution, gradual reintroduction of foods high in fermentable carbohydrates to determine individual tolerance to specific fermentable carbohydrates.

