

ULCERATIVE COLITIS

DIET INFORMATION

INFORMATION FOR PATIENTS

Do I need to change my diet

There has been extensive research into diet as a possible cause or trigger of Ulcerative Colitis, but so far there are no clear answers and there is little evidence that diet plays a role in Ulcerative Colitis

If you are experiencing a flare of your condition you may have unfavourable symptoms such as diarrhoea, nausea, vomiting, abdominal pain and a loss of appetite. These symptoms can make eating and drinking very difficult. Many people with IBD lose weight and become dehydrated during a disease flare.

There is no one single diet or eating plan that will relieve the symptoms for every person with IBD, but this general information may be helpful.

Diet during a flare

During a flare most people find a diet lower in fibre and residue helps to relieve symptoms such as cramping and wind. It can also reduce the number of times you pass bowel motions. A low residue diet aims to rest your bowel and allow it to heal. A low residue diet involves avoiding roughage (insoluble fibre) that your body struggles to break down. Roughage is found in skins, pips, seeds, whole grain cereals, nuts and raw fruit and vegetables.. Other food or drinks that can increase bowel motions are spices, greasy food, alcohol, caffeine and fizzy drinks. Often, these dietary changes are temporary and once a flare has resolved efforts should be made to reintroduce fibre gradually.

Diet during remission (no symptoms)

If your IBD symptoms are under control (remission), you should be able to eat a well balanced diet. A balanced diet consists of:

- protein sources (meat, fish, poultry or tofu)
- fruit and vegetables
- starchy carbohydrates (bread, rice, pasta or potatoes)
- dairy products (milk, cheese and yoghurt).

When you are feeling well and are able to eat it is advisable to maintain a healthy weight and keep yourself as well nourished as possible in case your symptoms return.

There are certain foods that are harder to digest than others. These include skins of fruit, whole grain, brown and wild rice, seeds, pulses (such as peas and beans), nuts, raw fruits and raw vegetables. If you have been following a bland diet low in fibre it is advisable to reintroduce these high fibre foods one at a time to avoid discomfort.

Some people with UC may be concerned that dairy products could trigger their symptoms – although, in general, people with UC are no more likely to be lactose intolerant than the general population. Because milk and dairy products are an important food group it is better not to give them up until you have spoken to your IBD team.

Generally, the most important thing is to eat a nutritious and balanced diet to maintain your weight and strength, and to drink sufficient fluids to stop you getting dehydrated.

For further information you can contact your IBD Nurse Specialist or Gastroenterology Specialist.

Further Useful information

You may find the following sources of information useful.

Crohn's and Colitis UK

www.crohnsandcolitis.org.uk

Digestive Disorders Foundation (CORE)

www.digestivedisorders.org.uk

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