

# Bloating, IBS



and a  
healthy diet

About 20-40% of people think they have a 'food allergy' and make changes to their diet that are quite often unnecessary and usually not very helpful. In fact less than 2.5% of the adult population actually suffer from a food allergy. The actual number of people suffering from other adverse reactions/food hypersensitivity reactions to foods is unknown.

The problem is made much worse by well meaning advice from celebrities and so called 'health

gurus' who advise people to follow some very bizarre diets, often cutting out all sorts of everyday foods. Doctors and health professionals including dietitians and registered nutritionists are worried by the increasing trend of people following such advice and self-selecting strict diets for no proper medical reason. The problem is made worse by the fact that many of these diets are nutritionally inadequate and can lead to other problems.

## **IBS – the size of the problem**

Around a third of people in the UK suffer some of the symptoms associated with IBS and for 1 in 10 people the symptoms are so bad they go to see a doctor. The doctor will usually run a series of tests to make sure there is no serious medical condition causing the symptoms. Sufferers then often have difficulty in finding help with controlling their symptoms and this is when there is a temptation to try any sort of remedy suggested.

## **IBS – the cause**

We do not know what causes IBS, but we do know that symptoms come and go and that stress and diet may have a role to play. IBS sometimes develops after a bout of gastroenteritis, after a course of antibiotics or after surgery but triggers often remain undetected.

## **IBS – is it food?**

There is no one dietary cause of IBS symptoms. Just as the symptoms vary from person to person, so can any dietary causes. IBS type symptoms may be aggravated by a low intake of fluid, a low intake of dietary fibre, a poor diet in general, erratic eating habits, long gaps between meals and by smoking or drinking large amounts of alcohol or coffee on an empty stomach. Sometimes it can be caused by an intolerance to one or more foods. There is no simple test to see what, if any, foods are involved. The only reliable method of diagnosis is to undertake a supervised exclusion and re-introduction diet whilst keeping a detailed food and symptom diary. This should be done only with the help of a registered dietitian.

## **IBS – the symptoms**

The main symptoms of IBS can vary from mild to severe and include some of the following:

- Abdominal pain and spasm

- Diarrhoea – loose or ribbon-like motions
- Constipation – solid, rabbit pellet-like motions
- Alternating diarrhoea and constipation
- Abdominal bloating
- Rumbling, flatulence and wind
- Sense of incomplete emptying of bowels
- Urgency to open bowels

And sometimes nausea, tiredness, belching and vomiting.

**Note – indigestion or feeling full or bloated in your stomach after eating is not usually IBS. IBS symptoms are usually lower in the abdomen. Other conditions that may be mistaken for IBS include lactose intolerance and coeliac disease amongst others. A gastroenterologist will help find the diagnosis as there are tests available to exclude or confirm both these conditions.**

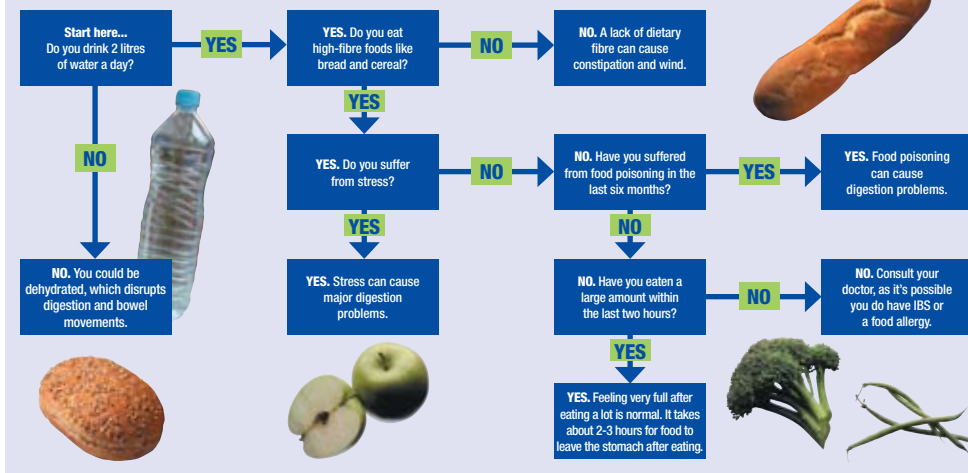
## **Bowels – what's normal?**

It's normal to open your bowels between 3 times a week and 3 times a day – anything more or less is not normal. Motions should be moist, solid and well formed, but easy to pass without straining.

## **That bloated feeling in the stomach – causes?**

A survey by the Grain Information Service found that 20% of the population claim to suffer from bloating. Many believe that bloating is caused by irritable bowel syndrome or as a result of suffering from wheat intolerance. However the main causes of bloating were linked to hormone fluctuations (32%), over-eating/ irregular meal patterns (28%) and stress related indigestion (27%). Many people feel bloated at lunch or in the evening, especially after a heavy meal. Recent weight gain also adds to discomfort after eating. Irregular meals, skipping meals and drinking a lot (especially fizzy drinks) at meal times can really aggravate that bloated feeling. The answer is to try and spread your food and drinks more evenly over the day.

## Find out what's causing your IBS like symptoms



Small regular meals and snacks are the best option. Some people find the bloating is worse after eating too much fruit, spicy food and fizzy carbonated drinks – all of which can cause gas and bloating. Cut down on these foods to stop the bloating. Being constipated can cause bloating and general discomfort in the abdomen. Constipation is usually linked to a lack of fluid and dietary fibre and can be greatly helped by drinking at least 8 -10 cups or glasses of non-alcoholic drinks a day and eating more fibre containing food including wholemeal bread and breakfast cereals. Some people find that eating certain foods like banana make them feel 'bunged up'. This is usually specific to an individual so foods should not be excluded without a firm basis. Being open minded is the key.

### IBS – finding if food is the cause

Once your doctor has ruled out any serious medical condition he may send you to a registered dietician for help in sorting out what you should or should not eat.

Keeping a food and symptom diary, which lists what you eat, drink and any symptoms can be used to pin point any foods that could be causing you a problem. The dietician may then suggest you change what you eat for a trial period. This is the basis of an exclusion and reintroduction diet. It may also include:

- Simply drinking more fluid and eating more fibre-containing foods to see if treating constipation reduces the IBS type symptoms.

- Changing the timing and size of your meals.
- A Pro-biotic yoghurt or drink, especially if you have been taking antibiotics or had gastroenteritis.

If food intolerance is suspected an exclusion diet will be suggested – in 3 stages:

1. **Exclusion stage** – when you avoid the suspect food for 2-3 weeks, continuing to keep a food diary
2. **Re-introduction or 'testing' stage** – when you add back the avoided foods – one at a time – in gradually increasing amounts one at a time until you reach normal serving sizes usually over 3 days. If symptoms return, then you should continue to exclude that food from your diet. If no reaction is noted, then add the food back into your diet.

Please note we do not suggest testing any food thought to have triggered a serious allergic reaction.

3. **Maintenance stage** – continue avoiding foods known to cause a reaction, but making sure your diet is nutritionally adequate. The dietician will recommend the best way to manage the restricted diet to ensure it is nutritious, varied and tasty. She will provide product information and recipes. Avoided foods should be re-tested from time to time, as quite often with IBS, foods that were a problem can be eaten with no symptoms after a few months.

If you are having a bad IBS 'attack' it can seem as if all foods cause a problem. This reaction is probably because your bowel is so sensitive at this time and as the symptoms improve so will your ability to eat a wider range of foods.

Any testing should involve gradual reintroduction and diary keeping. Even only being able to tolerate a small amount of a food, can allow a much more varied diet.

### Beware

- Following a strict exclusion diet long-term without follow-up
- Following a strict exclusion diet long term without 're-testing'
- Following a restricted diet that makes you feel unwell
- Following a restricted diet that causes rapid weight loss

### Who can you trust?

It is well known that 'tests' carried out in health food shops, bought off the internet or carried out by some unqualified health practitioners or nonregistered nutritionists are not reliable and frequently lead to incorrect results. This leads to people following unnecessarily strict diets. Even more worrying is that such tests and diets can delay the diagnosis and treatment of the true diagnosis. Independent sources such as the British Dietetic Association and the Food Standards Agency advise consumers not to self-diagnose but to go and see their GP who will also refer to a specialist clinic if required. A GP survey found that 90% of GPs agree that women are putting their health at real risk by eliminating foods without any medical consultation and that questionable and potentially harmful advice by unregistered nutritionists and other 'health gurus' is often to blame.

### Where to get help?

How do you know who is the best person to talk to? Not all so-called 'experts' are actually qualified in nutrition and dietetics. When looking for someone to consult about a suspected food allergy, consult only the following:

- **A General Practitioner (GP)**
- **A Registered Dietitian:** qualified dietitians work for the NHS or in private practice and are usually accessed through your GP. All practicing dietitians must be Registered – look out for the letters RD after their name and check their registration is up to date with the Health Professions Council: [www.hpc-uk.org](http://www.hpc-uk.org)

### Supporting research and further information

Please call us on 020 7493 2521 or visit us at [www.wheatintolerance.co.uk](http://www.wheatintolerance.co.uk)

#### Useful contacts

British Dietetic Association  
[www.bda.uk.com](http://www.bda.uk.com)

(see factsheet under 'foodfacts')

The IBS Network  
[www.theguttrust.org](http://www.theguttrust.org)

British Nutrition Foundation  
[www.nutrition.org.uk](http://www.nutrition.org.uk)

Flour Advisory Bureau  
[www.fabflour.co.uk](http://www.fabflour.co.uk)

CORE (previously digestive disorders foundation)  
[www.corecharity.org.uk](http://www.corecharity.org.uk)

Grain Information Service

