Restrictive diet can help ease intestinal issues

I have a friend who no longer eats wheat products, onions, garlic or a lot of other foods. She said it’s because she has been experiencing stomach problems and a “low-FODMAP” diet was recommended. It sounds serious. What is it?

FODMAP is an acronym used for foods containing certain carbohydrates that aren’t absorbed well in the intestines and can be rapidly fermented in the gut. In some people, they cause gas, bloating, abdominal pain, excess fluid, constipation and diarrhea. The acronym stands for fermentable oligosaccharides, disaccharides, monosaccharides and polyols — a mouthful, which is why you will hear the term “FODMAPs” a lot more often than the actual words it stands for.

The low-FODMAP diet was developed in the last 10 years by Australian researchers to treat people with irritable bowel syndrome. The syndrome is pretty common, but relatively few people have severe symptoms. It is sometimes confused with the more serious inflammatory bowel disease, which includes Crohn’s disease. The conditions have similar symptoms, but people with inflammatory bowel disease can also experience rectal bleeding and fever, and the disease can cause serious complications, including intestinal blockages, ulcers in the intestine and problems getting enough nutrients. Although it’s a separate medical condition, there is some evidence that a low-FODMAP diet could help people with this disease, as well. But the bulk of studies have focused just on people with irritable bowel syndrome.

One recent study, published earlier this year in the journal Gastroenterology, followed more than 90 patients for six weeks. Half followed the low-FODMAP diet, while the other half — the control group — simply avoided large meals, binges, and caffeine and alcohol, which are known to irritate the gut. More than 50 percent of the low-FODMAP group reported major improvement in abdominal pain, while only about 20 percent of those in the control group did.

Unfortunately, it can be difficult for consumers to identify low-FODMAP foods, and, as the diet regimen is relatively new, the list of foods continues to be updated. Among the foods to be avoided are asparagus, artichokes, onions, garlic, snow peas, cabbage, cauliflower, celery, mushrooms, sweet corn, apples, cherries, pears, mango, nectarines, peaches, plums, watermelon, apricots, dates, milk, yogurt, cream cheese or other soft cheese, ice cream, rye, wheat breads, wheat pasta, cashews, pistachios, honey, agave, high-fructose corn syrup, and other sweeteners including sorbitol, mannitol and xylitol. According to the Academy of Nutrition and Dietetics, while soy milk and silken tofu are high in FODMAPs, firm tofu is low, and soybean oil is FODMAP-free.

It can be easy for people who self-restrict on the low-FODMAP diet to fall into a diet too low in fiber or dairy and miss out on important nutrients. So, it’s strongly recommended that anyone following a low-FODMAP diet do so under the care of a gastroenterologist or registered diettitian familiar with the diet. After initial restrictions, the medical team can reintroduce higher-FODMAP foods and monitor for symptoms that may recur.