

Functional
Gastro Intestinal Disorders (FGID)
Welcome: Session 1

Nutrition & Dietetics

Housekeeping

- Welcome
- Zoom:
 - Turn off video if you want privacy
 - Use chat function to submit questions – to all or privately
 - Please change your Zoom name to your name or message your full name to privately on the chat so we can mark that you've attended.

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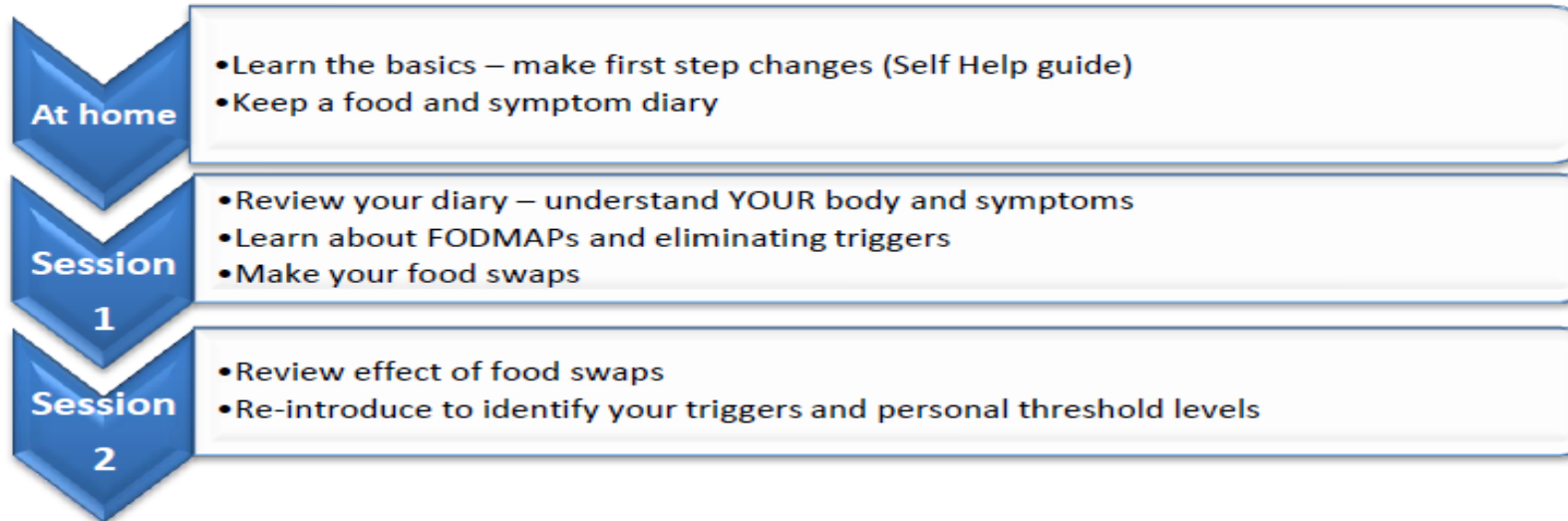
HOME HOSPITALS & CLINICS PATIENTS & VISITORS **HEALTHY LIVING** ABOUT

COVID-19

Alert Level 1 visitor policy information

- YOUR WELLBEING
- AGE RELATED
- RESIDENTIAL CARE
- PACIFIC AAA SCREENING PROJECT
- FIND ON HEALTHPOINT
- HPV STUDY
- CARDIAC REHAB & EDUCATION
- DIETETIC EDUCATION
- FEMALE PELVIC HEALTH
- STROKE

Process overview



Once you have completed your elimination and reintroduction phases, please call us on 09 489 0556 and leave a message with:

- Your name • Your NHI number and
- Whether you are happy to be discharged or need a clinic appointment*

Your call is very important to us – we look forward to hearing from you.

If we don't hear from you **within three months** of your last group session we will assume you are happy to be discharged. This is the _____

*If you need a clinic appointment we will expect that you bring your baseline food and symptom diary, and your challenge phase information/outcomes with you. Once we receive your call you will be booked as soon as possible depending on clinic availability.

Session 1

Low FODMAP for IBS

- Changes to symptoms with first line steps?
- Food and symptom diaries – personal baselines
- IBS overview
- Non food triggers
- Food triggers
- Low FODMAP diet

Bowel Questionnaire

- Symptoms - baseline

1. Do you currently have adequate relief of your gut symptoms (e.g. are your gut symptoms currently under control?) ☐ Yes ☐ No

2. Using the following rating scale, please rate your symptoms during the last week by ticking in the box that best describes each symptom.

Rating Scale

- **None** = no symptoms
- **Mild** = occasional or mild symptoms
- **Moderate** = frequent symptoms that affect some daily activities
- **Severe** = continuous symptoms that affect most daily activities.

Symptom	None	Mild	Moderate	Severe
a Abdominal pain / discomfort				
b Abdominal bloating / distension				
c Increased flatulence / wind				
d Belching or burping				
e Stomach / abdominal gurgling				
f Urgency to open bowels				
g Feeling of not being able to completely open bowels and pass all stool (incomplete evacuation)				
h Nausea				
i Heartburn				
j Acid regurgitation (reflux)				
k Tiredness / lethargy				
l Overall symptoms				

Gastro Group Symptom & Bowel Habits Self-Evaluation




3. During the last week, how often did you pass a bowel motion? You may tick more than one box.

- ☐ Once a week
- ☐ Once every 4-6 days
- ☐ Once every 2-3 days
- ☐ Once a day
- ☐ 2-3 times a day
- ☐ 4-6 times a day
- ☐ 7 or more times a day

Comments: _____

4. During the last week, which best describes your bowel motions (stools)? You may tick more than one box.

Bristol Stool Chart

- ☐ Type 1  Separate hard lumps, like nuts (hard to pass)
- ☐ Type 2  Sausage-shaped but lumpy
- ☐ Type 3  Like a sausage but with cracks on the surface

Irritable Bowel Syndrome (IBS)

- Classified by [Rome IV criteria](#)
 - Recurrent abdominal pain + change in bowel habits
 - Related to passing a bowel motion
 - Stool form may change
 - At least 6 months
 - Acknowledgement of gut-brain connection
- Most common functional gut disorder = IBS (Disorder of the Gut-Brain Interaction (DGBI))
 - Affects 8- 15% of the population
 - (400,000 -750,000 NZ'ers)

IBS Symptoms

- What type of IBS/DGBI?
 - IBS-Diarrhoea
 - IBS-Constipation
 - IBS-Mixed or IBS-V (variable)








IBS Symptoms

- Pain- location?
- Bloating (feeling) vs distension (↑ girth)
- Urgency
- Mucus
- Overflow
- Incomplete evacuation



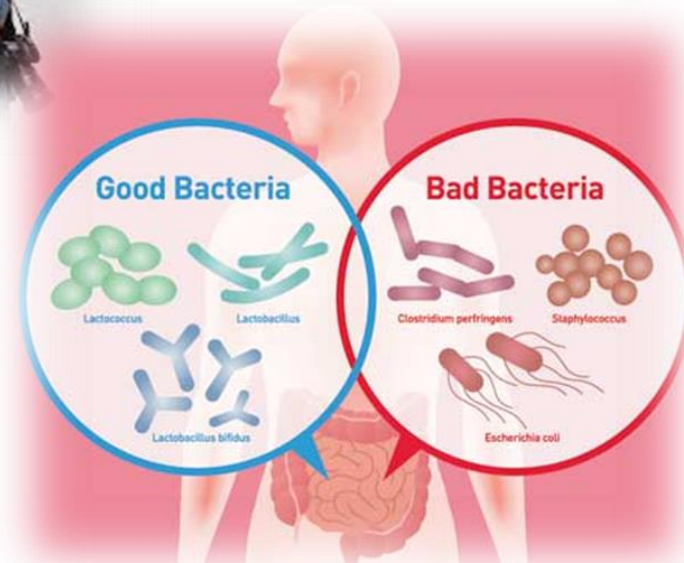
IBS Symptoms vs. normal GI function

- Cramps/ Spasms
- Borborygmi
- Colour/ Texture
- Fatigue
- Belching/ Reflux
- Nausea
- Anxiety & Depression

Bristol Stool Chart		
Type 1		Separate hard lumps, like nuts (hard to pass)
Type 2		Sausage-shaped but lumpy
Type 3		Like a sausage but with cracks on its surface
Type 4		Like a sausage or snake, smooth and soft
Type 5		Soft blobs with clear-cut edges (passed easily)
Type 6		Fluffy pieces with ragged edges, a mushy stool
Type 7		Watery, no solid pieces. Entirely Liquid

When was your start point?

- Food poisoning
- Western diet/not enough fibre?
- Overseas trip
- Gastro bug
- Sudden severe stress
- Antibiotics
- Surgery
- Frequent infections
- Chronic, since childhood
- Family history
- Anxiety?



Your Food and Symptom diary

Do you see:

- A pattern to your bowel type?
- Bad days vs good days?
- Specific meals that your symptoms were worse after?
- Other symptoms e.g. reflux, pain
- Did you note stress and menstrual cycle and how they impacted your symptoms?
- *All of this helps you understand YOUR body and symptoms*

WHAT I THOUGHT CAUSED MY FLARE-UP



WHAT ACTUALLY CAUSED MY FLARE-UP @youvegutthis



Is stress a trigger for you?



Identify any stress triggers you have

Relaxation /
breathing

Be mindful / slow down
eating

Management strategies

- Non-food
 - Your brain was not the cause, but it might be the solution...
- Food
 - Identify potential triggers
 - Understand your personal threshold

Non-food

- IBS and gut-directed hypnotherapy
- As effective as low FODMAP manipulation
- Weekly sessions over 6 weeks
- Works on reducing the visceral hypersensitivity
- Like FODMAP may not work for everyone
- Nerva App ~\$160

Food triggers

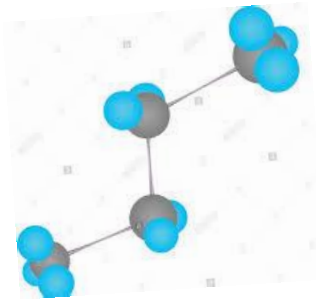
- First line triggers
 - Caffeine, carbonated beverages, high fat foods, spicy foods, artificial sweeteners (polyols).
- FODMAPs



Food triggers: FODMAPs

Fermentable (used by bacteria to form gas)

Oligo-saccharides (Fructans & GOS)



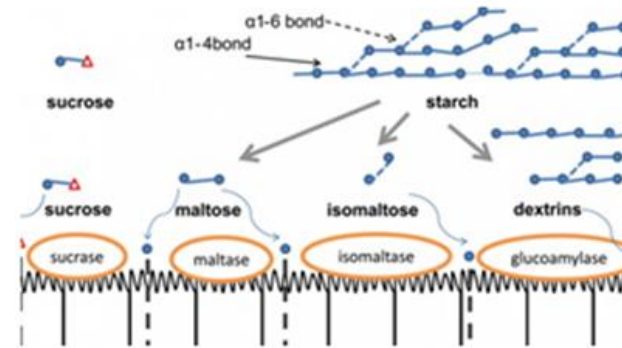
Disaccharides (Lactose)

Mono-saccharides (Fructose)

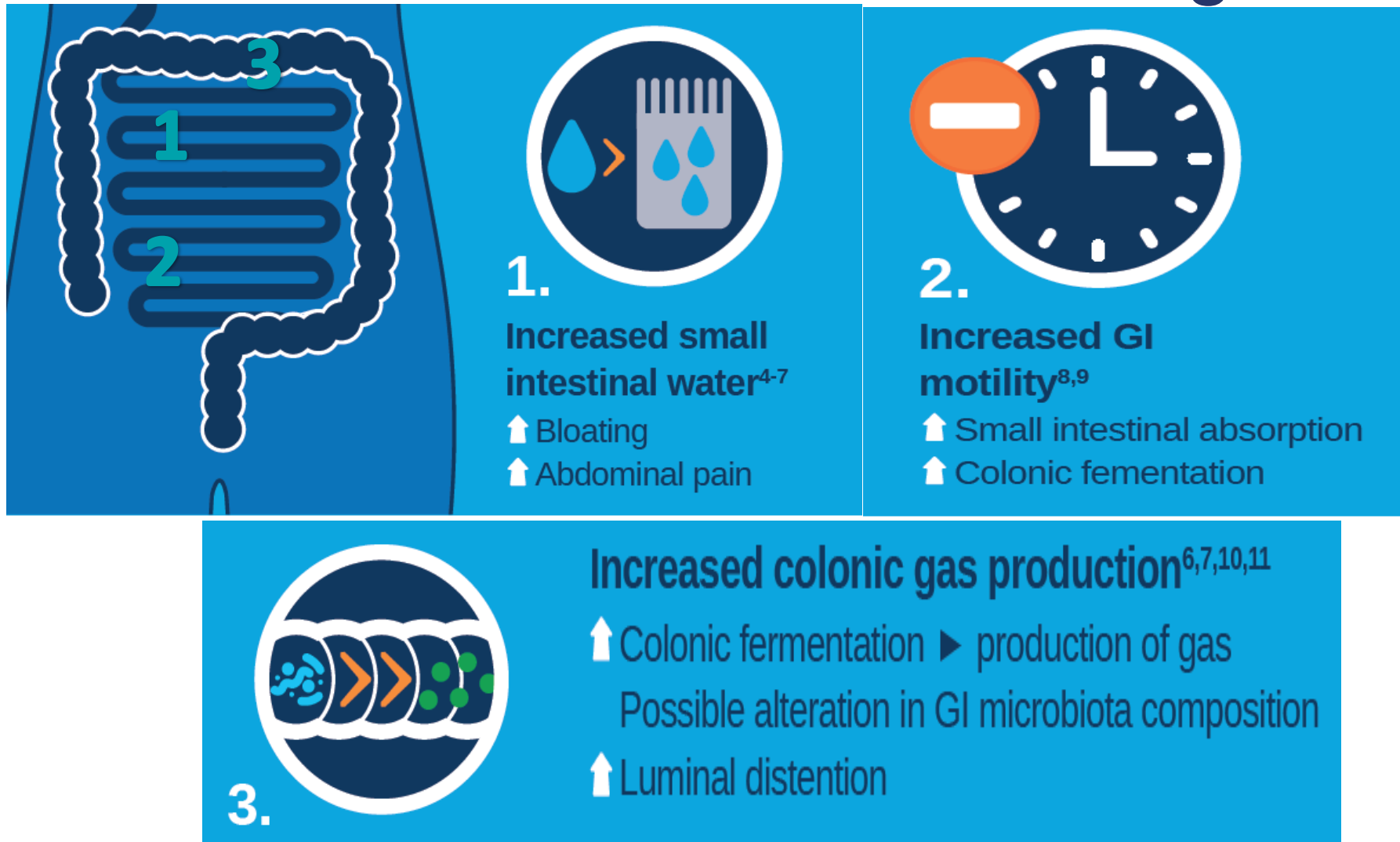
And



Polyols (- mannitol, sorbitol, sugar alcohols)



How do FODMAPs affect the gut?



Types of FODMAPs



Fructans

Found predominantly in wheat, rye, onions and garlic



Galacto-oligosaccharides (GOS)

Found in predominantly legumes/beans/pulses



Lactose

Found in dairy products, such as milk, soft cheese and yoghurts



Sugar polyols (sorbitol and mannitol)

Found in some fruit and vegetables and added to diet/low joule products (e.g. lollies, gum, soft drinks)



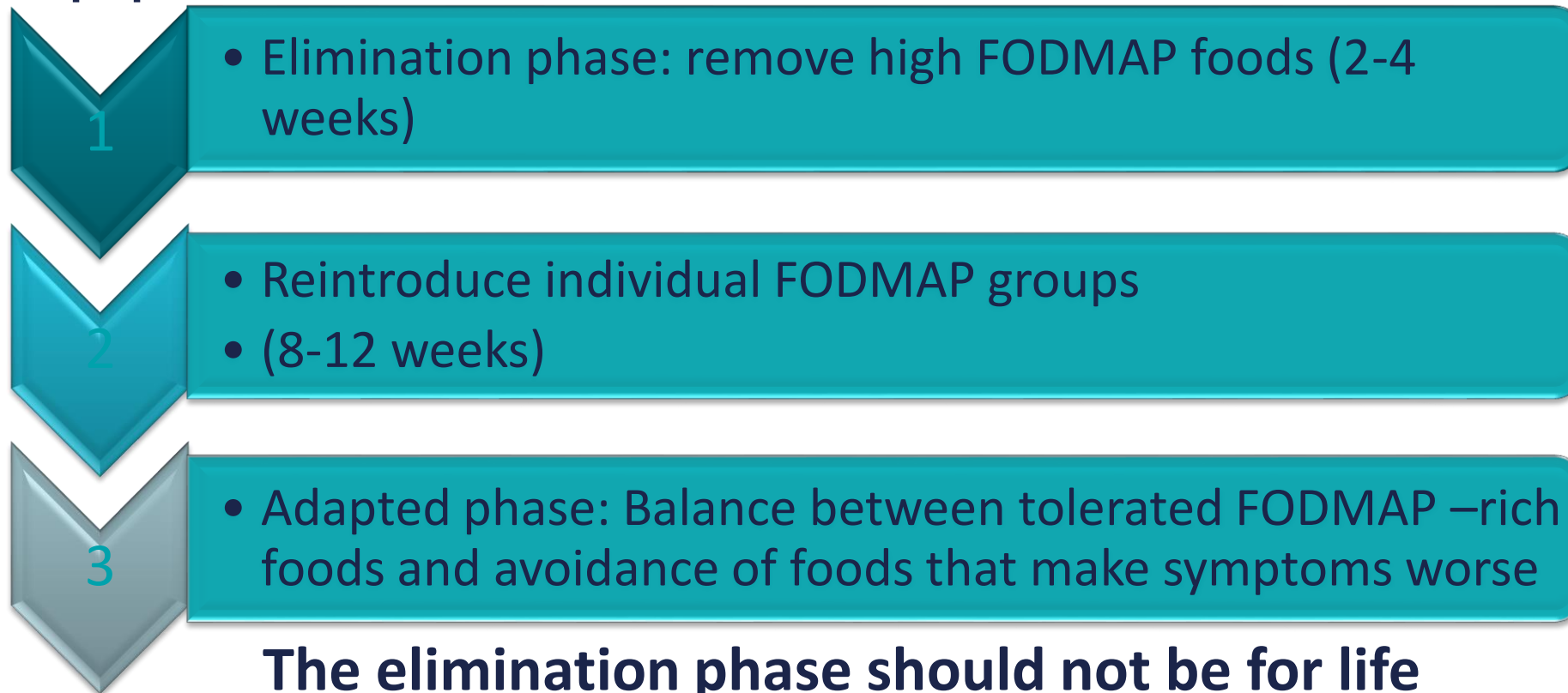
Excess fructose

Found predominantly in honey, apples and high fructose corn syrups



Low FODMAP process

- Symptom relief for 75% of people with IBS
- 3-step process



Should you do the Low FODMAP Diet?

If you have :

- Tried the first-step advice but it hasn't worked?
- Symptoms of probable FODMAP intolerance (diarrhoea, bloating, abdo pain, gas, constipation)?
- Had a negative coeliac test in the past 24 months (whilst eating enough gluten)?
- Possibly identified any FODMAP trigger foods from your baseline food and symptom diary?

Low FODMAP Diet: Step 1

- For 2-4 weeks remove all high FODMAP foods
- Look to replace these with low FODMAP alternatives
- Follow the diet as closely as possible so your gut is well rested
- Keep track of your symptoms daily, use 0-3 score
(0 = no symptoms; 1 = mild/slight symptoms; 2 = noticeable symptoms; and 3 = severe symptoms)
- If your score suddenly jumps from 0/1 to 3, write down what you had to eat over the past 24 hours.
- Note any stress or whether you are menstruating

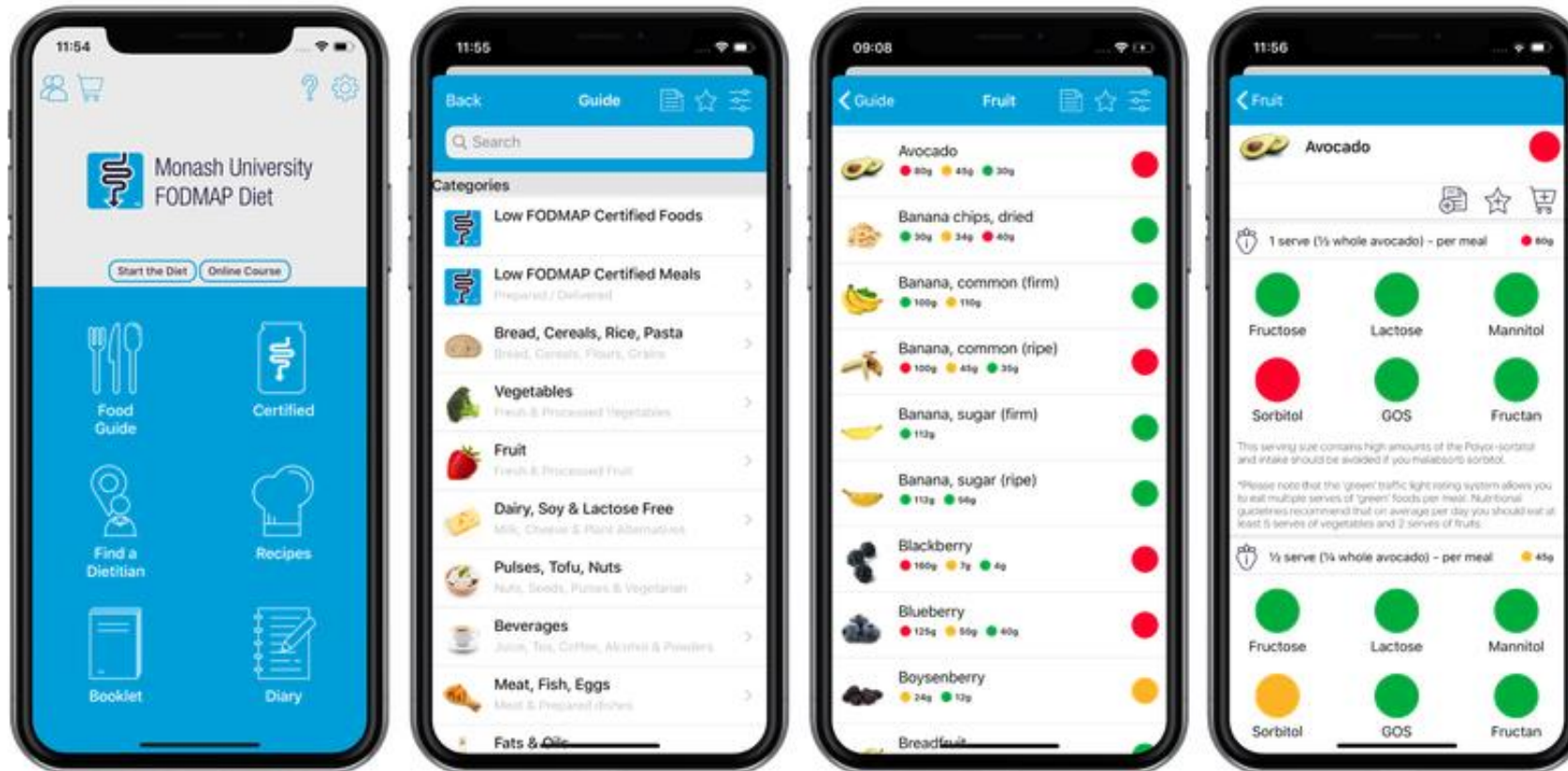
Low FODMAP Diet: Step 1

Useful tools:

- WDHB ‘Step 1 Low FODMAP’ Information Sheet
- Monash Uni FODMAP App
- <https://alittlebityummy.com>



Monash Low FODMAP app



Low FODMAP Diet: Step 1

- Your food diary: let's look now:
 - Are there specific foods that you are already avoiding?
 - Circle your high FODMAP foods – replace with a low FODMAP version

Wed:
7am Breakfast: Toast x2 slices + avocado
10am: muffin and coffee – latte
1pm: Leftover pasta and sauce
4pm: apple
6pm: Spaghetti bolognaise with broccoli and peas

Wed:

7am Breakfast: Sourdough toast x 2 slices + ¼ avocado
10am: Gluten Free muffin and coffee – latte - lactose free milk
1pm: Leftover dinner
4pm: Orange + oat based biscuit
6pm: Spag bolognaise – gluten free pasta and low FODMAP tomato pasta sauce. Garlic infused oil, green beans, carrot, cabbage.

Practical group activity

- Which high FODMAP foods do you eat the most often?
- Swap these first
- Consider serving sizes
- Check tables for food you CAN eat
- Page 21 for meal ideas/recipe sources and how to choose food when eating out.

Steps to success

Self guidance

- Learn the basics – make first step changes
- Keep a food and symptom diary

Session 1

- Review your diary – understand YOUR body and symptoms
- Learn about FODMAPs and eliminating triggers
- Make your food swaps

Session 2

- Review effect of food swaps
- Re-introduce to identify your triggers and personal threshold levels

Summary

- Read FGID guide and implement changes needed
- Complete food and symptom diary
- Review food & symptom diary – common triggers, FODMAPs
- Low FODMAP diet for 2-4 weeks
- Attend session 2 for reintroduction protocol

Questions

