

# Diet and Crohns disease

Providing support for patients and their families

Crohns disease is a chronic inflammatory condition that can affect any part of your digestive system which includes your mouth, food pipe (oesophagus), stomach, small intestine, large intestine and anus. Nutrition is an important part of your treatment and it is important to make changes to your diet to ensure you are well nourished but also to help minimise symptoms during a flare. Dietary advice depends on whether your disease is active; this is often called having a flare.

## Do I need to follow a specific diet if I have crohns disease?

There is no specific diet for crohns disease and you will only make short term modifications to your diet to preserve or promote your nutritional status or to improve symptoms. It is important to note that dietary changes can only help to improve symptoms and will not reduce inflammation in your bowel.

## What advice is there for when I have no active disease (no flare)?

When you are in remission (no flare) then it is essential to make sure you are well nourished and regain any lost weight you may have experienced during a flare. Good nutritional status also helps to prevent vitamin and mineral deficiency and infection, and maintain disease remission.

- Base meals on higher fibre starchy foods like potatoes, bread, rice or pasta.
- Have some dairy or dairy alternatives (such as soya drinks).

- Eat some beans, pulses, fish, eggs, meat and other protein.
- Choose unsaturated oils and spreads, and eat them in small amounts.
- Drink plenty of fluids (at least 6 to 8 glasses a day).

## What advice is there for when I am experiencing a flare?

When you are experiencing a flare you may need more energy and protein due to inflammation and healing. Also depending on where your inflammation is you may have difficulty digesting and absorbing the food you eat.

- Eat little and often (5-6 smaller portions per day).
- Increase protein rich foods such as meat, fish, tofu, egg, dairy.
- Drink plenty of fluid (at least 8 cups per day) especially if experiencing diarrhoea.
- Limit caffeine and alcohol.
- If you are losing weight:
  - Fortify foods with skimmed milk powder, butter, cheese, honey (or suitable dairy alternatives).
  - Include energy dense food such as nourishing drinks (hot chocolate, milk shake), full fat and full sugar varieties, desserts and puddings.
  - Talk to your GP or dietitian about nutritional supplement drinks.

## What foods should I exclude while I am having a flare?

Although excluding certain foods whilst flaring can improve symptoms it is important to ensure you still maintain a balanced diet and replace any excluded food groups with suitable alternatives. Fibre is the only generally recommended food exclusion during a flare.

- **Fibre:** Skins, seeds, and pith of fruits, vegetables, legumes and grains.

Excluding fibre during a flare is recommended to reduce symptoms such as diarrhoea, bloating, abdominal pain and bleeding. This is only a short term dietary change which should be changed once symptoms have resolved. *Examples of high fibre foods include: beans, legumes, onions, peppers, broccoli, cauliflower, peas, sweetcorn, wholegrain breads, pastas and rice, raw/dried fruits and vegetables.*

Dairy and gluten (protein found in wheat, rye and barley) are also commonly excluded foods by those with crohns disease. It is not generally recommended to exclude these foods unless you have a diagnosis of lactose intolerance or coeliac disease.

- **Dairy:** Milk, cheese, yoghurt

Dairy foods can sometimes cause symptoms and are sometimes excluded. It is important to remember to replace excluded dairy produce with suitable fortified alternatives (fortified with calcium and vitamin D) as they are a good source of calcium. *Examples of non-dairy calcium containing foods include soya milk and yoghurt, breads, sardines, spinach, baked beans, orange, figs and orange juice.*

PRODUCED BY The Department of Nutrition and Dietetics, at the Royal Sussex County Hospital, University Hospitals Sussex NHS Foundation Trust

This leaflet is intended for patients receiving care in Brighton & Hove or Haywards Heath

© University Hospitals Sussex NHS Foundation Trust

### Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

Reference no. 2039 Publish Date: June 2021 Review Date: June 2024

- **Gluten:** Bread, pasta, pastries and biscuits  
Gluten is also another commonly excluded food constituent and gluten containing foods should be substituted with suitable replacements such as *rice, potatoes, and gluten free bread and pasta.*

## Am I at increased risk of developing vitamin and mineral deficiencies?

Nutritional deficiencies are more common in those with crohns disease and in particular calcium and iron deficiency, which can result in osteoporosis and anaemia respectively.

- You are at a higher risk of developing deficiencies if you have had part of your bowel surgically removed, if you have taken steroids and if you follow a restrictive diet for a long time.
- It is recommended to include 3+ portions of calcium rich foods per day (dairy or fortified non-dairy sources).
- Iron can be found in foods such as red meat, sardines, hummus, baked beans, fortified breakfast cereals, egg, bread, and cocoa powder. If you are a vegetarian it is important to focus on plant based sources of iron and fortified foods.
- Other deficiencies such as vitamin B12, vitamin D, and folate can also occur. Please discuss with your GP or dietitian if you are concerned.

## Where can I find more information?

### Crohns and colitis UK

<https://www.crohnsandcolitis.org.uk/news/updated-publication-food-and-ibd>

Speak to a member of your IBD team about a referral to a dietitian if further advice is needed.