



To alleviate symptoms of functional gastrointestinal disorders, try eliminating or restricting these foods:

Oligosaccharides

Wheat
Onions, beans, and peas
Processed food additives

Disaccharides

Milk (all types including skim; keep to 50mls or less)

Monosaccharides

Apples
Sugar snap peas
Honey
Fructose

Polyols

Peaches
Plums
Mushrooms
Cauliflower
Sugar-free sweets

The Low FODMAP Diet Approach

Do you frequently suffer from abdominal pain, bloating, flatulence, and changes in bowel habits? Strong research has shown that some carbohydrates can cause irritation to the bowels and contribute to these symptoms. The carbohydrates are called **F**ermentable **O**ligosaccharides, **D**isaccharides, **M**onosaccharides and **P**olyols... otherwise known as FODMAP. The restriction of these FODMAPs from the diet has been found to have a beneficial effect for sufferers of Irritable Bowel Syndrome, Colitis, Crohn's Disease, and other functional gastrointestinal disorders. The low FODMAP diet was developed at Monash University in Melbourne, Australia. Since its development the diet has been studied for its efficacy for individuals with functional gastrointestinal disorders, and strong evidence now considers it beneficial to be commonly recommended for individuals with these conditions.

Understanding the FODMAP Concept

Carbohydrates can be present in different forms in foods, varying from long-chain carbohydrates (e.g. starch) to simple sugars (e.g. glucose) that are well-digested and absorbed to produce energy. Fiber and resistant starch are long-chain carbohydrates resistant to digestion and are important for stool formation and normal bowel function. The Australian group has produced strong evidence that a group of short-chain carbohydrates, FODMAPs, are problematic for those with functional gastrointestinal disorders because they are poorly absorbed in the small intestine and rapidly fermented by bacteria in the large intestine. The resultant production of gas potentially results in bloating and flatulence. Restriction of FODMAP intake, therefore, has been found to result in improvement of symptoms.

Many people find it helpful to start a food diary when undertaking this diet. Simply write down each food item you consume at each meal on a daily basis, noting the quantity of food and any possible symptoms you may get from eating a particular food item.

In the column at the left is a brief list of FODMAP-unfriendly foods. Generally trying to stop usage of these foods if you can is advisable, but if you really need certain items, try to keep the usage down to a minimum. Onion and garlic are particularly bad triggers and should be avoided. Try to avoid processed foods and meats. Always scan ingredient lists and look for the main culprits: onion, garlic, and wheat products. And try to limit fruit to one portion per day. For a more complete listing of FODMAP-friendly and unfriendly foods, visit this website:

www.ibsdiets.org/fodmap-diet/fodmap-food-list/

A Low FODMAP Diet is usually recommended for 6-8 weeks at a time. By this time you should be able to identify which foods set-off those uncomfortable feelings.

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Patient Testimonials

I Was Feeling Better than I Had in Years...

"Thank you to ConnectCare3 for providing support and guidance on my path to wellness. As my employer's HR Director, I will certainly encourage my co-workers to utilize ConnectCare3 in the event that they have questions regarding a past or current medical condition, prescribed medical treatment, or the need for a second opinion.

**--Laura Bowman
Lititz, PA**

In my late teens, I was diagnosed with a digestive disorder and placed on medication to treat the effects of this disorder. The prescribed medication's side effects left me feeling sluggish and dizzy. After using this medication for several years, I began to research other ways to manage my disorder.

Diet, I discovered, became a huge factor in managing my digestive disorder and I began paying close attention to the foods that I ate and how my digestive disorder reacted to the foods that I ate. I was able to successfully control many of the symptoms by simply watching what I ate for several years.

Recently, my employer began offering a healthy goals program which incorporated a meal plan designed specifically for my weight loss goals. As I incorporated many healthy choices into my diet, I began to notice increased symptoms of my digestive disorder. After four weeks of incorporating healthy choices into my diet, my digestive disorder symptoms were so severe that I could only tolerate yogurt and saltines.

I consulted with our Health Coach, and he suggested that I contact ConnectCare3. I spoke with a Nurse Navigator, and she listened to my medical history and current symptoms. She provided me with guidance in seeking a female gastroenterologist and also informed me about the FODMAP diet. Within days of following the FODMAP diet, my symptoms were under control and I was feeling better than I had in years.

Upon researching the FODMAP diet, I found that many of the healthy foods that I was eating as part of my weight loss meal plan were actually trigger foods of my digestive disorder. I am currently being treated by a gastroenterologist, and tests have been ordered to determine if I have other digestive-related disorders.

I found my experience with the Nurse Navigator and ConnectCare3 both supportive and educational. I had never heard of the FODMAP diet until I spoke with the Nurse Navigator and quickly discovered that the symptoms of my digestive disorder were definitely triggered by the foods that I was choosing to eat. She assisted me with finding a doctor that I felt comfortable with providing treatment for my medical condition, and she also answered many questions that I had concerning my current diagnosis. Additionally, she provided me with resources to read regarding the FODMAP diet.

Thank you to ConnectCare3 for providing support and guidance on my path to wellness. As my employer's HR Director, I will certainly encourage my co-workers to utilize ConnectCare3 in the event that they have questions regarding a past or current medical condition, prescribed medical treatment, or the need for a second opinion.