

Nutrition Information for Pediatric Inflammatory Bowel Disease

Good nutrition is important in childhood and adolescence and can be affected by inflammatory bowel disease (IBD). There can be many causes of inadequate nutrition especially at diagnosis or during an IBD “flare.” These causes can include inadequate food intake from a poor appetite, a greater need for nutrients because of inflammation, or improper absorption from an inflamed digestive tract. Some medications may also affect vitamin absorption.

Diet modifications

Exclusive enteral nutrition (EEN) is proven to induce remission in pediatric Crohn’s disease (see Enteral Nutrition Therapy and IBD for more details). The specific carbohydrate diet (SCD) is a popular diet with some evidence that it can maintain remission in IBD, but it is not considered a proven treatment at this time. Further research is needed to better understand who SCD works best for and why (see Specific Carbohydrate Diet and IBD for more details). Any special diet being considered should be discussed with your child’s health care team to make sure it is safe and appropriate.

Nutrition and IBD is a topic that is currently being studied, so nutrition advice is subject to change based on future research. In general, most children/teens do not have any obvious food intolerances. Eating healthy with IBD is the same as eating healthy without IBD, which means eating a variety of foods from each food group, in the right amounts, and in as natural form as possible.

During a “flare” it is important to make wise food choices and consider limiting intake of high-fat, greasy, or fried foods as well as sweets including sugar sweetened beverages, desserts, and juices. These foods typically do not have a high nutrient value (do not provide optimal nutrition) and could worsen symptoms. Some may worry about high-fiber foods such as raw fruits and vegetables, but these foods provide good nutrition and should only be limited if they cause symptoms.

Any suspected intolerance may improve as inflammation improves. For example, lactose intolerance could occur if a specific part of the small intestine (called the duodenum) is inflamed. However, the intolerance should improve as



inflammation improves, and milk may be tolerated well once in remission. It can be helpful to keep a food journal if your child does not seem to tolerate certain foods. Discuss your concerns with your child's health care team.

There may be a few specific situations that require a change in your child's diet. Dietary fiber may cause pain and block the intestine if it is narrowed by inflammation (stricture) or after surgery. A low-fiber diet can be helpful when inflammation of the intestines has narrowed the passageway. Again, these foods are generally healthy, and such changes in diet are temporary until inflammation improves.

If your child is experiencing weight loss, a high-calorie, high-protein diet may be beneficial. Dairy and meat food groups (including animal and non-animal foods) provide good sources of calories and protein. For those having trouble eating, nutrition shakes can be useful in supplementing the nutrients they miss. If your child is unable to eat or drink enough nutrition, a temporary feeding tube can be used to alleviate the pressure of eating and ensure your child gets necessary nutrition. Remember that weight loss could be a sign of active inflammation, so your child's medical team should be informed if weight loss occurs.

Vitamins, minerals, herbs, and medications

It is important to let your child's physician know if you are giving your child any over-the-counter medicines, multivitamins, minerals, or herbal supplements, as they can possibly interact with medications.

It is usually recommended that your child take a multivitamin with iron. If your child's iron level is low, the physician may recommend an additional iron supplement. Additional folate may be recommended if your child is on a medication that interferes with folic acid absorption.

Calcium and vitamin D are important, especially during the critical time of childhood and adolescence, for achieving optimal bone health. Your child may also need additional calcium and vitamin D, especially if they are taking steroids. There could be other circumstances that require additional vitamins and/or minerals, so it is important to discuss any questions about nutrition with your child's physician or dietitian.

Overall, nutrition plays an important role in treatment of IBD. Proper nutrition may enable your child to reach their full growth potential and live a healthier life.

→ Locate a Pediatric Gastroenterologist

IMPORTANT REMINDER: *This information from the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN) is intended only to provide general educational information as a definitive basis for diagnosis or treatment in any particular case. It is very important that you consult your doctor about your specific condition.*

714 N Bethlehem Pike, Suite 300, Ambler, PA 19002 **Phone:** 215-641-9800 **Fax:** 215-641-1995 **naspghan.org**
Visit us on **Facebook** at <https://www.facebook.com/GIKidsOrg>, follow us on **Twitter** @NASPGHAN and **Instagram** #NASPGHAN

