



Irritable Bowel Syndrome (IBS)

You have been diagnosed with Irritable Bowel Syndrome (IBS). This leaflet signposts you to dietary advice and emotional support resources available for you and your family.

Dietary advice

For some people, IBS symptoms may improve with some dietary changes.

We would recommend that you watch an information webinar produced by the dietitians in Somerset, for some first line advice. These can be accessed at:

[Webinar 1: First Line Dietary Advice for IBS – Webinars on Irritable Bowel Syndrome - patientwebinars.co.uk](https://patientwebinars.co.uk)

<https://patientwebinars.co.uk/condition/ibs/webinars/webinar-1-first-line-dietary-advice-for-ibs/>

or scan the QR code on the right to take you to the site:

If you feel that diet does play a part in your IBS symptoms and have been following the dietary advice in this webinar for at least four weeks and you are still experiencing IBS symptoms, please ask your GP to refer you to the community dietitians for further advice and support.

It is important to remember that not everyone has improvements in their symptoms by changing their diets. The hospital and community dietitians have also produced some useful leaflets on IBS and managing symptoms of IBS. These are available on the Trust website at:

<https://www.royalberkshire.nhs.uk/leaflets/irritable-bowel-syndrome-ibs>

<https://www.royalberkshire.nhs.uk/leaflets/irritable-bowel-syndrome-ibs-constipation>

<https://www.royalberkshire.nhs.uk/leaflets/irritable-bowel-syndrome-ibs-diarrhoea>

<https://www.royalberkshire.nhs.uk/leaflets/irritable-bowel-syndrome-ibs-wind-and-bloating>

For some, other factors may have more impact on your symptoms and there is some evidence that shows that symptoms can be triggered by an event such as a viral or infective gastroenteritis (stomach flu) or by a stressful event or by both.



NHS Talking Therapies and IBS

We know that changes in our gut can disrupt our daily routine, including work or social life, and can disrupt our eating habits. Understandably, this may lead us to worry about symptoms. This stress can further impact on our bowel function, creating a 'vicious cycle' of stress and physical symptoms.

When we feel stressed or worried it can trigger chemical changes that interfere with the normal workings of the digestive system.

How can therapy help?

Talking Therapies like Cognitive Behavioural Therapy can help you reduce your physical symptoms and improve your quality of life.

The therapy involves learning how thoughts, behaviour and physical symptoms affect each other as well as giving you practical techniques to help you improve how you feel.

Learning about your warning signs and ways to manage your thoughts and behaviour can help you:

- improve gut symptoms like bloating, pain, constipation or diarrhoea
- develop stable, healthy eating patterns;
- know how to manage your unhelpful thoughts
- accept and process your emotions;
- manage your stress;
- help improve the things you do to cope

How to access talking therapies

You can refer yourself directly to Talking Therapies in Berkshire without seeing a GP first.

Therapy is free on the NHS and fast: 97% of the people we treated in 2020/21 started treatment within 6 weeks.

Visit <https://talkingtherapies.berkshirehealthcare.nhs.uk//sign-up> or call our friendly team 0300 365 2000 (8am-8pm, Mon-Thurs and 8am-5pm Fri).

Useful resources

In the following pages, we have included some useful information from the British Dietetic Association and from Somerset NHS Foundation Trust.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Gastroenterology

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Food Fact Sheet: Irritable Bowel Syndrome and Diet

Irritable Bowel Syndrome (IBS) is a medical term used to describe a collection of gut symptoms.

Symptoms vary from one individual to another and can be worse for some than others. It is a very common condition affecting around one in five adults. An assessment for IBS should be considered if you have had any of the following symptoms for at least six months: abdominal pain or discomfort, bloating, or change in bowel habit.

A diagnosis of IBS should be considered only if there is abdominal pain or discomfort that is either relieved by defaecation or associated with a change in bowel habit. This should be accompanied by at least two of the following four symptoms:

- altered stool passage (straining, urgency, incomplete evacuation)
- abdominal bloating (more common in women than men), distension, tension or hardness
- symptoms made worse by eating
- passage of mucus.

Other features such as lethargy, nausea, backache and bladder symptoms are common in people with IBS, and may be used to support the diagnosis. It is important to have a diagnosis of IBS confirmed and other conditions such as coeliac disease and inflammatory bowel disease ruled out. Four reasons to consult your doctor for referral to see a specialist are where you have possible IBS symptoms and any of the following:

- unintentional and unexplained weight loss
- rectal bleeding
- a family history of bowel or ovarian cancer
- a change in bowel habit to looser and/or more frequent stools persisting for more than six weeks in a person aged over 60 years.

What steps can I take if I have IBS?

Try to:

- eat three regular meals a day
- try not to skip any meals or eat late at night (smaller meal sizes may ease symptoms)
- limit alcohol intake to no more than two units per day and have at least two alcohol free days a week
- reduce intake of caffeine-containing drinks e.g. no more than two mugs (three cups) a day
- reduce intake of fizzy drinks
- drink at least eight cups of fluid per day, especially water or other non-caffeinated drinks, for example herbal teas
- cut down on rich or fatty foods including chips, fast foods, pies, batter, cheese, pizza, creamy sauces, snacks such as crisps, chocolate, cake and biscuits, spreads and cooking oils, and fatty meats such as burgers and sausages
- reduce your intake of manufactured foods and cook from fresh ingredients where possible
- limit fresh fruit to three portions per day (one portion is 80g).

Seek advice from a healthcare professional about the amount of dietary fibre that is right for you.

Helpful Hints:

- take time to relax – relaxation tapes, yoga, aromatherapy or massage may help
- take regular exercise such as walking, cycling, swimming
- take time to eat meals – chew your food well
- keep a food and symptom diary whilst you are making changes so you can see what has helped
- Make one change at a time so that you can see what has helped.
- Make changes according to your symptoms.

Dietary changes can often help IBS symptoms and sometimes simple changes are all that are needed

If symptoms include bloating and wind:

- Limit intake of gas producing foods e.g. beans and pulses, Brussels sprouts, cauliflower, and also sugar-free mints/chewing gum.
- You may find it helpful to eat oats (such as oat-based breakfast cereal or porridge) and linseeds (up to one tablespoon per day).

If symptoms include constipation:

- Try to gradually increase your fibre intake – any sudden increase may make symptoms worse. Rich sources include wholegrains, oats, vegetables, fruit and linseeds. They help to soften stools and make it easier to pass.
- Try adding one tablespoon per day of brown or golden linseeds (whole or ground) to breakfast cereal, yoghurt, soup or on salad. Have around a small glass/teacup (150ml) of fluid with each tablespoon of linseeds taken.
- Avoid eating extra wheat bran.

If symptoms include diarrhoea:

- Replace lost fluids by drinking plenty.
- Limit caffeine intake from tea, coffee and soft drinks to three drinks per day.
- Try reducing intake of high-fibre food (such as whole-wheat breakfast cereals and breads).
- Avoid sugar-free sweets, mints, gum and drinks containing sorbitol, mannitol and xylitol.

Probiotics

You may wish to try 'probiotic' supplements, yoghurts or fermented milk drinks. Take them daily for at least four weeks to see if they improve symptoms. If they do not appear to help then you could try an alternative brand.

Further advice

Give your bowels time to adjust to any changes. If your symptoms persist after following general lifestyle and dietary advice, try to re-introduce the foods you have cut out and ask your doctor to refer you to a healthcare professional with expertise in dietary management, who can ensure your diet is nutritionally adequate whilst following dietary intervention e.g. a dietitian.

They may suggest you trial a diet restricted in shortchain fermentable carbohydrates (also known as a low FODMAP diet). Most people will be able to see an NHS dietitian after being referred by a doctor, health visitor or other medical staff. You may be able to selfrefer. Alternatively, if you wish to see a private dietitian, you can search online at freelancedietitians.org, which is run by the BDA's Freelance Dietitian Group.

NOTE: IBS is not caused by food allergy. If you feel that you may be suffering with a food allergy, please refer to Allergy UK (www.allergyuk.org) or Anaphylaxis Campaign (www.anaphylaxis.org.uk) for further information.

Summary

Dietary changes can often help IBS symptoms and sometimes simple changes are all that are needed. Remember to monitor your progress by keeping a food and symptom diary. If you need further help, ask your doctor to refer you to a healthcare professional with expertise in dietary management.

Food Fact Sheet: Calcium

Calcium is important at all ages for strong bones and teeth. This Food Fact Sheet lists the recommended amounts of calcium for different groups of people and the foods and drinks that are rich in calcium. It also gives you some ideas on how you might achieve your recommended intake.

You are more at risk of calcium deficiency if you:

- are on a cow's milk or lactose free diet
- have coeliac disease
- have osteoporosis
- are breastfeeding
- are past the menopause

Meals and snack ideas

- Start the day with cereal (calcium-fortified) with milk or a milk substitute (calcium-fortified).
- Use tinned sardines or pilchards (with the bones) instead of tuna in a sandwich or on toast.
- Have a stir fry including tofu, broccoli spears and chopped nuts for lunch or dinner.
- Add yoghurt/soya yoghurt to fruit as a pudding or use milk or a milk substitute (calcium-fortified) to make custard and milk puddings.
- Try a glass of low-fat milk as a snack or to help rehydrate after exercising.
- Don't forget that low-fat dairy products have as much and often more calcium than the full-fat versions.
- Remember to check non-dairy sources have added or are 'fortified' with calcium.
- Try to avoid sugary drinks and snacks. If you choose a calcium-rich food which contains sugar, it is best to eat this as part of a meal instead of as a snack.

Healthy lifestyle advice for healthy bones

- Be active – weight bearing activities are best e.g. walking, aerobics, cycling, running and tennis. Aim for at least 30 minutes of activity, five times a week.
- Smoking is associated with an increased risk of osteoporosis, low bone density and increased risk of hip fracture. Stopping smoking prevents further excess bone loss.

Vitamin D and calcium

Vitamin D helps the absorption of calcium from foods. Most of our vitamin D is made by the action of sunlight on the skin. Between April and September, going outside for 15 minutes, two or three times a week between 11am and 3pm without sunscreen should be enough to produce sufficient vitamin D.

All adults and children over the age of one should consider taking a daily supplement containing 10µg vitamin D, especially during autumn and winter. A daily supplement is recommended all year round for those who are at risk of low vitamin D including: all pregnant and breastfeeding women, babies and young children, people aged 65 years and over and people with darker skin or who are not exposed to much sun.

Foods rich in vitamin D include oily fish, eggs and fortified breakfast cereals/spreads but you cannot get enough vitamin D from food alone. You may need to take a supplement if you do not get enough (safe) sun exposure or if you are over 65 years old.

Calcium supplements

Calcium supplements are available from chemists/ pharmacies, supermarkets and health food shops.

If you are unable to meet your daily requirements from food, these supplements can be of use but ask your doctor for advice.

Calcium supplements are available free of charge to women and children who are eligible for Healthy Start vouchers. Ask your health visitor about this.

How to check if you're getting enough calcium in your diet:

1. Use the TABLE 1 to check how many 'calcium stars' you need.
2. Then use TABLE 2 to see how much calcium is found in different foods.
3. Then, simply add up how many calcium stars you are getting from your diet to make sure you are having enough.

TABLE 1 – Daily guideline amounts

Check how many calcium stars{1} you need (1 star = 60mg approx)

Group	Age (years)	Calcium (mg) per day	Calcium stars per day
Infants	Under 1	525	9 stars
Children	1-3	350	6 stars
	4-6	450	7 1/2 stars
	7-10	550	9 stars
Adolescents	11-18	800 (girls)	13 stars
		1000 (boys)	17 stars
Adults	19+	700	11 stars
Breastfeeding mums		1250	21 stars
Women past the menopause		1200	20 stars
Celiac Disease	Adults	at least 1000	17 stars
Osteoporosis	Adults	1000	17 stars
Inflammatory Bowel disease	Adults	1000	17 stars
	Post menopausal women and Men over 55 years	1200	20 stars

{1}When choosing your calcium stars – remember that high sugar intake often leads to tooth decay. It is important to avoid frequent sugary drinks and snacks for your teeth and your overall health. If you want something sugary, it is best to have it at mealtimes.

TABLE 2 – Calcium in different foods

Calcium in dairy products	Quantity	Calcium (mg)	Stars 1 star = 60mg
Milk, all types	200ml	240	****
Cheese	matchbox-size 30	220	****
Cheese triangle	1 triangle - 15g	60	*
Yoghurt	120g	200	***
Fromage frais	1 pot/pouch - 45-100	60	*
Calcium-enriched fromage frais	1 pot/pouch - 50-90g	125	**
Malted milk drink	25g serving in 200ml milk	440-710	***** to *****
Hot chocolate (light) 20g (with water)	25g serving in 200ml water	200	***
Rice pudding	½ large tin (200g)	176	***
Custard	1 serving (120ml)	120	**
Milk chocolate	30g	66	*
Non-dairy sources of calcium			
Calcium fortified products			
Calcium enriched milk alternatives eg. rice{2} /soya/oat/nut/coconut etc	200 mls	240	****
Soya bean curd/tofu (Only if set with calcium chloride (E509) or calcium sulphate (E516), not nigari)	60g	200	***
Calcium fortified soya yoghurt/dessert/ custard	125g	150	**
Calcium enriched orange juice	150mls	180	***
Calcium fortified infant cereals	1 serving	60-120	* to **
Calcium fortified cereals	30g serving	130-150	**

Calcium fortified instant hot oat cereal	1 tbsp dry cereal (15g)	200	***
Calcium-fortified bread	1 slice (40g)	191	* to ***
Other non-dairy sources of calcium			
Sardines (with bones)	½ tin (60g)	258	****
Pilchards (with bones)	1 serving (60g)	150	**
Tinned salmon (with bones)	½ tin (52g)	47	*
Whitebait	1 small portion (50g)	430	*****
Scampi in breadcrumbs	6 pieces (90g)	190	***
White bread	2 large slices (100g)	100	*
Wholemeal bread	2 large slices (100g)	54	*
Pitta bread/chapatti	1 portion (65g)	60	*
Orange	1 medium (120g)	75	*
Broccoli, boiled	2 spears (85g)	34	*
Spring greens	1 serving (75g)	56	*

{2}Children under four and a half years old should not have rice drinks as a replacement for cow's milk, breast milk or infant formula. N.B. Spinach, dried fruits, beans, seeds and nuts are not good sources of calcium. This is because they contain oxalates and/or phytates which reduce how much calcium your body can absorb from them. You should not rely on them as your main sources of calcium.

Low Lactose Diet for Irritable Bowel Syndrome (IBS)

Lactose is a sugar found in animal milks (including cow, sheep and goat). Some people with IBS are unable to digest and absorb this sugar, which can lead to symptoms of bloating, diarrhoea and abdominal pain. Lactose intolerance is a completely different condition to dairy allergy and this sheet is **not** suitable for those with dairy allergy.

To assess your tolerance, we recommend you follow a low lactose diet for at least 2 weeks and monitor your symptoms.

If your symptoms improve on a low lactose diet...

It indicates you may have lactose intolerance. To confirm this, after following a low lactose diet, drink a glass of regular milk. If your symptoms reoccur after doing the above on 3 separate occasions, lactose intolerance is the likely diagnosis and you should continue to follow a low lactose diet for the next 3 months, but repeat this challenge every 3 months.

If your symptoms do not improve on a low lactose diet...

It is unlikely lactose is the cause of your symptoms. Therefore, there is no need to avoid lactose and you should return to your previous diet.

Most people with lactose intolerance can tolerate small amounts of lactose in some dairy foods, especially when it is spread through-out the day. On a low lactose diet, it is important **not** to exclude all sources of dairy as they provide an important source of calcium. The information below will help you decide which foods to choose, and which to avoid on a low lactose diet.

Milk

A maximum of 50ml whole, semi-skimmed or skimmed milk as part of a meal/drink is usually well tolerated.

If you wish to use more than 50ml milk at a time, choose a low lactose alternative from the following:

Choose

- ✓ Lactose free milk
- ✓ Soya milk
- ✓ Rice milk
- ✓ Oat milk
- ✓ Nut milk
- ✓ Coconut milk

Avoid

- ✗ Cow/Sheep/Goat milk
- ✗ Buttermilk
- ✗ Milk Powder
- ✗ Evaporated milk
- ✗ Condensed milk
- ✗ Organic low lactose milk (ie: organic soya/oat/

Cheese

Choose

- ✓ Hard cheese (cheddar, blue, gouda, edam, mozzarella, parmesan, feta)
- ✓ Soft cheese (brie, camembert, goat's cheese)
- Maximum 2 tbsp cottage cheese, ricotta, quark

Avoid

- ✗ Processed cheese
- ✗ Cheese spread
- ✗ Reduced fat cheese of all types (including hard & soft reduced fat cheeses)

Yoghurts/Desserts

Choose

- ✓ 2 tbsp maximum of normal yoghurt
- ✓ Lactose free yoghurt
- ✓ Soya yoghurt/dessert/custard
- ✓ 1 scoop maximum of normal ice-cream
- ✓ Soya ice cream
- ✓ 2 tbsp maximum of normal custard

Avoid

- ✗ Low fat yoghurt
- ✗ Drinking yoghurt
- ✗ Fromage frais

Others

Choose

- ✓ Butter/margarine
- ✓ Cream
- ✓ Sour cream
- ✓ Crème fraîche
- ✓ Dark chocolate
- ✓ 50g maximum of milk or white chocolate

Avoid

- ✗ Low fat versions of cream of any kind.

Prepared Foods/Drinks & Food Labels

Check the ingredients lists of all prepared food & drinks, and avoid any containing the following: Milk; Lactose; Whey; Curds; Milk Powder.

Recommended daily intake for calcium for adults is **700mg** per day. See link: <https://www.bda.uk.com/resource/calcium.html>

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Item	Serving Size	Approximate Calcium Content (mg)
Milks		
Milk (Whole, Semi-Skimmed, Skimmed)	200ml	240
Lactose free milk*	200ml	240
Soya milk*	200ml	240
Rice milk*	200ml	240
Coconut milk*	200ml	240
Oat milk*	200ml	240
Nut milk*	200ml	240
Yoghurts/Desserts		
Lactose free yoghurt	125g pot	125
Soya yoghurt	100g pot	120
Soya custard	125g	150
Soya dessert	125g pot	150
Ice cream	1 scoop	70
Soya ice cream	1 scoop	6
Cheese		
Hard cheese	30g	225
Soya cheese	30g	130
Soft cheese	30g	80

* Some milks, especially organic versions, may not be fortified with calcium. Check food labels and choose milks that contain at least 120mg of calcium per 100ml of milk

Item	Serving Size	Approximate Calcium Content (mg)
Fruit, Vegetables, Nuts & Pulses		
Tahini paste	1 tbsp	150
Spinach	90g	150
Apricots, ready to eat, dried	3	50
Orange, Large	1	50
Cabbage	90g	50
Baked beans	100g	50
Sesame seeds	1 tbsp	50
Sultanas or raisins	2 tbsp	25
Broccoli, cooked	2 spears	25
Almonds or Brazil nuts	6	25
Walnuts	9	25
Kidney beans	1 tbsp	25
Fish		
2 canned pilchard	2	250
2 canned sardine	2	250
White fish poached in water	170g	25
Fish fingers	2	25
Other		
Orange juice with added calcium	200	250
White bread enriched with calcium	2 slices	100
White bread	2 slices	50
Wholemeal bread	2 slices	25
Chapatti	1	25
1 egg	1	25

Examples of Products - Supermarket own brands are available



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First Line Dietary Advice For Constipation

Information for patients

What is constipation?

Constipation is a common digestive condition. It can mean that you are not passing stools regularly, or you are unable to completely empty your bowel. Constipation can also occur when you are finding it difficult to pass a stool, because the stools are hard and dry. This can cause you to strain.

Constipation can lead to other symptoms including: abdominal bloating or discomfort, stomach pains or cramps, excess wind and lethargy.

What are the causes of constipation?

There are many causes of constipation however the two dietary factors most associated with this condition are:

- Not having enough fibre in the diet
- Not having enough fluid

Therefore, dietary changes which focus on increasing fibre and fluid intake can be beneficial in the management of constipation.

Dietary Advice for the Management of Constipation

- **Gradually increase your intake of fibre**

Fibre is the edible parts of plants which pass through your bowels undigested, therefore it provides the bulk to your stools.

Try to gradually increase your intake of high fibre foods (it is important to do this gradually as a sudden increase can make symptoms worse).

Rich sources of fibre include:

- Fruits
- Vegetables
- Bean and pulses
- Oat based products
- Wholegrain cereals

Try gradually introducing brown or golden linseeds (whole or ground) into your diet.



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Start with ½ teaspoon a day and gradually build up to 1 tablespoon a day. These linseeds can be purchased in supermarkets and health food shops. They can be sprinkled on cereals, yogurts, soups, stews or salads

It is vital that you increase your fluid intake if you are using this approach. The fibre provides your stool with extra bulk, but to make this stool easy to pass, you need to ensure it is soft and slippery; this can be achieved by drinking enough fluid. Therefore, ensure that you have a 200ml glass of fluid with each spoonful of linseeds taken.

- **Gradually increase your intake of fluid – aiming for at least 2 litres (8 glasses) of fluid a day**

Drinks can include water, milk, squash, herbal teas and other **non**-caffeinated drinks.

Other advice for the Management of Constipation

Identify a bowel routine – find a time of day and a place where you are comfortable to spend time on the toilet in the correct positioning.



- Respond to your bowel's natural pattern – when you feel the urge to go, respond to this by trying to open your bowel. Delaying can make the constipation worse.
- Keep active.

Laxatives: Discuss the use of laxatives with your GP but ensure that you do NOT use ***lactulose*** as this can make IBS symptoms significantly worse due to its ability to ferment in the gut.