

## Module 4 What If It Isn't FODMAPs?

### Lesson 6: Diverticula Disease

#### Transcript

00:01 Hi there, Ryanne here from the Diet versus Disease team, and I'm here to introduce you to diverticula diverticular conditions, including diverticulosis and diverticulitis.

00:13 What's the difference and what can we do to avoid a recurrent flare? So first, what is it? Diverticulitis is an inflammatory condition associated with infected pockets.

00:26 You can see pockets protruding out of the intestinal wall in the small or the large intestine. It begins as diverticulosis or just the sacs forming.

00:39 When, and this occurs when the muscle of the lining of the intestine weakens and pushes out into these sacs.

00:49 Then diverticulitis occurs when these small pockets or sacs become infected or inflamed, really painful, often treated with antibiotics or surgery.

01:00 So it's not a curable condition without surgical removal of the segment of the intestine with the pouch but rather it's manageable, right?

01:11 Meaning we can shorten the duration, the severity and the recurrence, our risk of reoccurring flare with diet and lifestyle change.

01:20 So now let's discuss a bit about why and how this happens and what we can do to prevent the reoccurring flares.

01:29 So why does this occur? Research suggests it's likely a combination of factors including dietary habits, possibly those that lead to constipation, like limited amounts of fiber also due to aging and genetic conditions like Ehlers Danlos Syndrome, which affects the connective tissue.

01:52 So essentially, if the connective tissue of the intestine is weakened due to this medical condition, the sac or the diverticula is more likely to form.

02:02 As of 2016, in the US, about 58% of those 60 years of age or older are likely to develop diverticula.

02:12 So it's really common That says 75% of those will, will remain asymptomatic. They'll never progress to diverticulitis, but 25% are likely to present with at least vague abdominal pain.

02:27 Then diverticulitis. You know, what causes this? The theory is that it's caused from high pressure, inter luminal pressure or, and or stool entrapment in the sacs.

02:43 So things like straining, constipation and poorly digested foods could be playing a role. So what are the symptoms of a flare?

02:57 So starting with diverticulosis, what does this feel like? There may be episodes of pain very common in the lower abdomen, more specifically in the lower left abdomen.

03:08 So you can see in the sigmoid colon or the S shape section, this is where the diverticula usually form and where they become infected.

03:19 So in diverticulosis, they're not infected, but the passing of stool or passing of gas often can relieve this vague abdominal pain in that area.

03:31 Then diverticula diverticulitis is the inflammatory version of diverticulosis where those little packets become inflamed or infected. This could be either complicated or uncomplicated.

03:45 And uncomplicated just refers to localized diverticula inflammation complicated. Diverticulitis arises when inflammation produces an extra co complication, things like obstruction, bleeding, abscess perforation, et cetera.

04:05 Because of these potential complications, your dietitian will advise you to collaborate with your doctor on treatment if the, if the flare doesn't resolve quickly.

04:18 So what are we going to talk about in our diet visit and your, in your dietitian visit related to diverticuli, diverticulosis, diverticulitis.

04:28 We'll likely be looking for a few key details, including these, not limited to these but your daily intake of fiber, fat and fluid.

04:38 So we're going to be looking at this through conversation, but also tracking in chronometer. We'll want to make sure that you're eating the right amounts of and right kinds of fiber alongside enough water to support the activity of fiber in your digestive system.

04:53 Gradual increases in fiber are preferred. We'll also be talking about tendencies towards constipation, preferences and fruits, vegetables, whole grains and nuts.

05:05 And we'll be doing a supplement review, what you're taking any vitamin or mineral labs that are available. And we'll also be talking about probiotics.

05:17 So what to do if you start to think that a flare is coming on? So again, in severe cases of diverticulitis, surgery and regular antibiotic use is required to overcome infection.

05:30 However, in recent research suggests that aggressive antibiotic treatment is overused, particularly in cases that are less severe. So, there are dietary changes we can make in the early stages of diverticulitis that could turn things around.

05:46 So we would likely start with a lower fiber, possibly even a liquid diet for 24 hours. If you have an infection in your colon and the, the inflammation is aggravated by the stool in your colon.

05:59 So clear liquid diet for 24 hours can help to clear that out. As the pain improves, we would advance to a low fiber, low FODMAP nutrition plan and gradually increase your fiber and water content over time.

06:15 Now, this is really important that you worked with your dietician on this because we want to gradually increase fiber to avoid creating new complications.

06:24 So this could take from a week to a couple of weeks to get back up to adequate fiber intake. Always, always contact your primary care physician if chronic pain and fever occurred together and you've, you have the diagnosis of diverticulosis, not to say you're going to naturally progress to antibiotics, but we want them to be aware again because of the potential for complications.

06:51 So what can we do to avoid a recurrent flare? Anybody who's experienced a flare knows will do whatever it takes to avoid going through it again.

07:00 So what can be done first? Address the risk factors. What increases the risk and what decreases the risk? So, things that increase the risks are having a high B M i, smoking tobacco inactivity, constipation, following a generally a western westernized diet, which is high end dietary fats, highly refined products and red meats and regular intake of NSAID use.

07:24 So that means that even two taking aspirin twice a week can increase your risk for diverticulitis and or bleeding. So, it's something to consider if you have pain, what else can you reach for?

07:37 And then things that decrease the risk, what can you add into your, your lifestyle to reduce the risk of this flare?

07:43 So taking in an adequate amount of fiber. So again, working with your dietician on what that means, including fruits, vegetables, whole grains, a plant emphasized diet, adequate hydration to help the fiber work, weight management, and then potentially probiotics.

07:58 There are certain strains of probiotics, lactose, bacillus kci and lactobacillus pair kci that improve symptoms during a diverticulitis flare. So, it's not that they are recommended to reduce the risk of a flare, but it can help you get through it.

08:14 So it's good to have on hand. And then certainly having a good game plan in place to manage the mild flare fast, you want to make these changes as soon as you feel that abdominal pain come on so that it doesn't snowball into something bigger.

08:29 So work with your dietician on that game plan. So, what about fiber? Adequate or high fiber may not reduce the risk of diverticula forming like the sax forming from the get-go.

08:45 However, getting your fiber right can reduce your risk of a flare. So why is that? Well, fiber helps to reduce the risk of constipation and it also feeds and maintains a healthy microbiome.

08:58 So how much fiber are we shooting for women? 25 grams per day for men, 38 grams per day. And for men and women 50 years or older, we're aiming for about 21 grams.

09:10 So this is an adequate intake that means that it varies a bit per person to person. So do really do work with your dietician on what makes most sense for you.

09:20 So what about nuts, seeds and husk? You know, we've been taught for years that these foods literally get stuck in the diverticula causing irritation and eventually diverticulitis, but this theory's never been proven and research actually shows there's no link.

09:36 So that said, our patient experience suggests that there's an issue with seeds, so such as sesame seeds on a bagel, which I have a picture of there.

09:46 So because evidence is a mixed bag, it may be better to air on the side of caution and avoids seeds if you have recurrent flares and you're really trying to get a hold of it.

10:00 So what about FODMAPs then? Well, newer research is suggesting that a low FODMAP diet can help prevent the recurrence of diverticulitis.

10:09 Why is this? Well, a high fiber diet, too much fiber can contribute to i b s symptoms like constipation or bloating, which could contribute to diverticulitis risk.

10:19 Remember, constipation is on the increased risk side. So, then a low fodmap lower fiber diet could be a useful tool.

10:27 The key point here is personalization, right? We need to work together to identify the amount and types of fiber that you tolerate and that in the long term reduce your risk for that painful flare.

10:40 Thank you for your time. And make sure to touch base with your dietician if you have any further questions.