

Dietary Recommendations for Patients with Gastroparesis

What is Gastroparesis?

Gastroparesis is a disorder that slows or stops the movement of food from the stomach into the gut. The muscles of the stomach, which are controlled by nerves, break up food and move it through the digestive system. Gastroparesis can occur when these nerves are damaged and the stomach muscles stop working as they usually would.

What causes Gastroparesis?

Diabetes is the most common known cause of gastroparesis. It is caused by high blood glucose levels damaging the nerves in the digestive system.

What are the symptoms of Gastroparesis?

- Nausea
- Feeling full quickly and being unable to finish a normal sized meal
- Vomiting undigested food
- Acid reflux or acid regurgitation
- Abdominal pain and/or bloating
- Loss of appetite
- Constipation
- Diarrhoea (increased frequency and loose consistency)
- Unexplained low or high blood glucose levels

Your symptoms may be aggravated by:

- Foods containing higher amounts of fat
- Large quantities of food high in fibre, such as raw fruit and vegetables
- Or fizzy drinks.

How to manage Gastroparesis

Gastroparesis cannot usually be cured, but dietary changes and medical treatments can help you to control the condition.

What can I do to help my Gastroparesis?

Managing your blood glucose levels can help reduce the progression of gastroparesis. It may also help lessen the symptoms of gastroparesis.

What about medication?

Several prescription medications are available to treat gastroparesis. Please speak to your GP or specialist consultant for advice on which medication would be most suitable for you and your symptoms.

What about my diet?

Some dietary changes that may help you manage your Gastroparesis include:

- **Eat small, frequent meals.** Reducing the meal size reduces the distension or stretching of the stomach from the meal. By eating smaller meals, you will not feel as full or bloated and the stomach may empty faster. With the reduction in meal size, increasing the number of meals to 4-6 per day may be needed to maintain adequate nutritional intake and avoid malnutrition.
- **Avoid foods high in fat.** Fat can delay emptying of the stomach. Eating less fat-containing foods will decrease the amount of time food stays in the stomach. However, fat-containing liquids, such as milkshakes, may be tolerated and provide extra calories if needed.
- **A diet low in fibre is suggested.** Fibre slows digestion. In addition, fibre may bind together and cause a blockage of the stomach, called a bezoar.
- All fruits and vegetables have the potential to cause a bezoar but they are very rare. Whole oranges and persimmons (Sharon fruit) have the highest rate of bezoar formation so should be avoided.
- If you make changes to your diet to reduce your fibre intake you may notice a change in your blood glucose levels, please speak with your diabetes nurse or dietitian for support with managing this and adjusting your medications if required.
- **Chew food well before swallowing.** You should avoid food that may not easily be chewed such as broccoli, corn, popcorn, nuts and seeds. Solid food in the stomach does not empty well.
- **Sip drinks** throughout the meal.
- **Avoid fizzy drinks.**
- **Sitting upright or walking for 1-2 hours** after meals may help in the emptying of the meal from the stomach.

- **A daily multivitamin/mineral supplement** can be taken if dietary intake is inadequate. Speak to your dietitian or doctor about this.
- **Avoid alcohol and smoking** as these may slow digestion.

In summary:

1. Eat smaller, more frequent meals, e.g. 4-6 small meals a day.
2. Eat less fatty foods.
3. Avoid too much fibre.
4. Avoid foods that cannot be chewed well.
5. Take sips of fluid throughout the meal.
6. Avoid alcohol, fizzy drinks and smoking.

Foods that are encouraged:

Starchy/ carbohydrate foods	<ul style="list-style-type: none">■ Breads or any bread product, cereal and crackers. Opt for low fibre options which are generally white.■ White pasta or rice.■ Low fibre breakfast cereals such as Ready Brek, Cornflakes or Rice Krispies.
Protein	<ul style="list-style-type: none">■ Lean red meats.■ Chicken and turkey, without fat or skin.■ Minced meats are often easier to eat and digest.■ Slow cooked lean meats in soups or stews are a good option and tend to be soft.■ Fish, e.g. flaked white fish or tinned fish such as tuna, mackerel and salmon.■ Eggs■ Smooth peanut butter or houmous

Vegetables	Vegetables – juiced or cooked and if needed, blended/strained. Vegetable soups are good options.
Fruit and puddings	Stewed fruits or soft tinned fruit with low fat yogurt, low fat custard or rice pudding.
Beverages	Juices, milk products if tolerated such as milk shakes or hot milky drinks.

(If necessary foods can be pureed to aid digestion.)

For further information see:

- www.nhs.uk/conditions/gastroparesis/Pages/Introduction.aspx
- www.diabetes.org.uk/Guide-to-diabetes/Complications/Nerves_Neuropathy/
- www.diabetes.co.uk/diabetes-complications/diabetes-and-gastroparesis.html
- www.niddk.nih.gov/health-information/health-topics/digestive-diseases/gastroparesis/Pages/facts.aspx

Written information cannot replace personalised recommendations. For further advice please seek a dietetic referral from your consultant or GP.

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