



INE | INSTITUTE OF
NUTRITIONAL
ENDOCRINOLOGY

Food Principles: FODMAPs

Dr. Ritamarie Loscalzo



Medical Disclaimer: The information in this presentation is not intended to replace a one-on-one relationship with a qualified health care professional and is not intended as medical advice. It is intended as a sharing of knowledge and information from the research and experience of Dr. Ritamarie Loscalzo, drritamarie.com, and the experts who have contributed. We encourage you to make your own health care decisions based upon your research and in partnership with a qualified health care professional. This presentation is provided for informational purposes only and no guarantees, promises, representations or warranties of any kind regarding specific or general benefits, have been or will be made by Dr. Ritamarie Loscalzo, her affiliates or their officers, principals, representatives, agents or employees. Dr. Ritamarie Loscalzo is not responsible for, and shall have no liability for any success or failure, acts and/or omissions, the appropriateness of the participant's decisions, or the use of or reliance on this information.



FODMAPs

- FODMAPs were discovered AFTER the SCD and GAPS diets were developed
- Low FODMAPs Diet was developed in 1999 at Monash University in Australia by Susan Shepherd and Peter Gibson



The FODMAPS Acronym:

- Fermentable
- Oligosaccharides
- Di-saccharides
- Mono-saccharides
- And....
- Polyols



Low FODMAPs Diet is Helpful For:

- IBS symptoms
- Crohn's
- Colitis
- SIBO
- Leaky gut
- Celiac disease



Clients Typically Affected

- Gas and bloating within 3 hours of eating
- Leaky gut
- Multiple food allergies
- Celiac
- Diagnosis of SIBO
- History of IBS or IBD



FODMAP Intolerance Symptoms

- Gas
- Bloating
- Diarrhea
- Constipation
- Burping
- Abdominal pain
- Diagnosis of SIBO



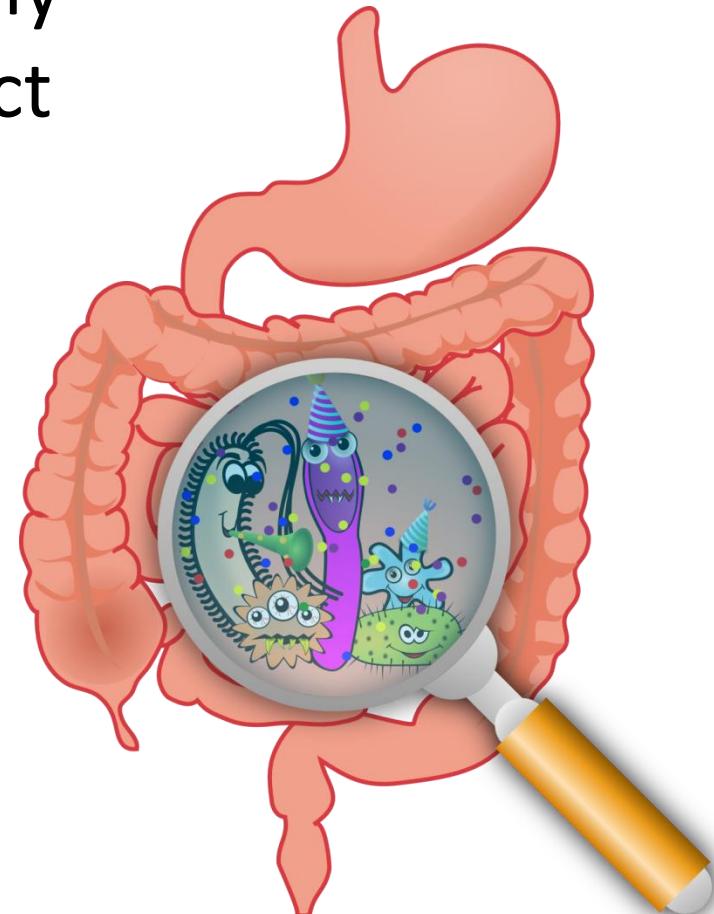
Understanding FODMAPS Symptoms:

- Gas in the digestive system is created through fermentation
- Foods will be fermented if poorly digested
- Bacteria in our digestive tracts will adapt to ferment ANYTHING we can't digest



Fermentable

- High FODMAP foods are poorly absorbed in the intestinal tract and can feed bacteria
- A wide variety of bacteria ferment FODMAPS
- Fermentation in the large intestine = normal
- Fermentation in the small intestine creates gas/bloating



Oligosaccharides

- Oligo = “a few, a small amount” of saccharides (sugars)
- More than “di” (2)
- Not “poly” (many)



Fructans & Fructo Oligo Saccharides (FOS)

- Chains of fructose molecules with a glucose molecule at the end

➤ Examples:

- Wheat
- Onions
- White bulbs of green onions
- Garlic
- Leeks
- Legumes: peas, dry beans, and lentils (these are also alpha-linked GOS)
- Cabbage
- Brussels sprouts

- Artichokes
- Beets
- Asparagus
- Chicory
- Dandelion tea
- Inulin and FOS in prebiotics and other supplements



Galactans & Galacto Oligo Saccharides (GOS):

□ Galacto = “milk” - a less sweet sugar found in:

- Dairy products
- Sugar beets
- Jerusalem artichokes
- Manufactured by the body during lactation as glucose is converted into galactose
- GOS foods may be included on a low FODMAP diet IF tolerated

□ Examples:

- Chick peas
- Lentils
- Cabbage
- Brussels sprouts
- Legumes: beans, peas, soy
- Green beans



Oligosaccharide Examples

- Onions
- Green onions (white part)
- Garlic
- Leeks
- Peas
- Legumes
- Lentils
- Cabbage
- Brussels sprouts
- Artichokes
- Beets
- Asparagus
- Chicory
- Dandelion tea
- Inulin
- Chick peas
- Green beans
- Beans (other types)
- Wheat
- Soy
- FOS (powders and supplements)

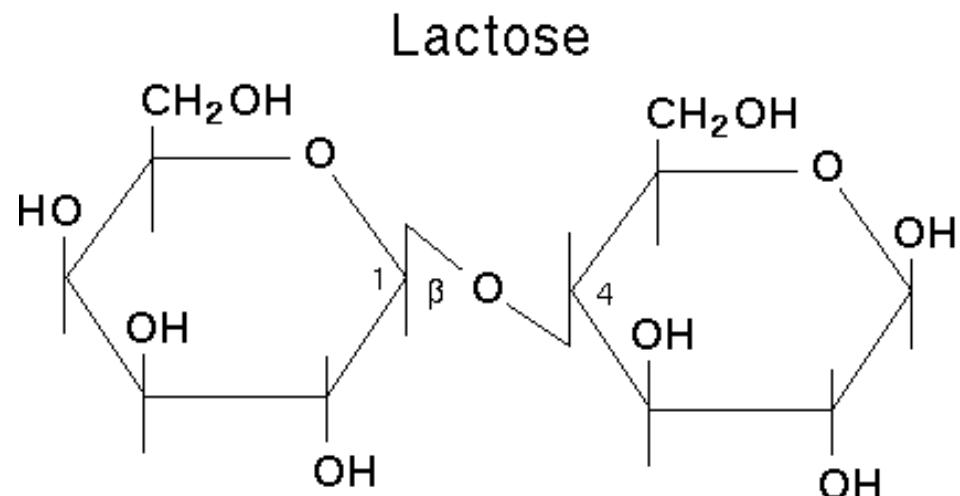


Oligosaccharide-Rich Meals



Disaccharides

- Lactose, sucrose, maltose, and isomaltose
- Under 4 mg of lactose is often tolerated
- The following have 1 mg of lactose:
 - 2 tablespoons of cottage cheese
 - 1 tablespoon of cream or sour cream
 - 1 teaspoon of cream cheese



Disaccharide Examples

- Sweet potato
- Turnip
- Pears
- Kamut/spelt
- Edamame
- Raw broccoli
- Pickles or pickled foods
- Malted grains - sprouted and dried
- Kiwi
- Wheat
- Corn
- Peas



Disaccharide-Rich Meals



Monosaccharides

- Glucose
- Fructose
- Galactose



Monosaccharides: About Fructose

- Fructose: Sugars derived from fruits
- Low FODMAPS diet is LOW and/or BALANCED fructose
- Digestive tract has both fructose and glucose transporters for absorption
- Piggyback effect:
 - When fructose is less than or equal to glucose
 - Less digestive disturbance

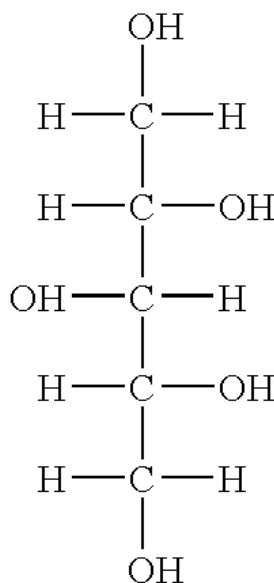


Monosaccharide-Rich Meals

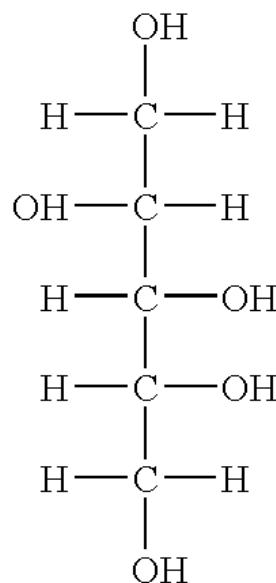


Polyols

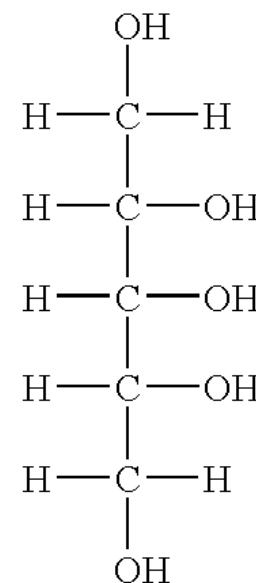
- Sugar alcohols that often end in “-ol”
- In some “sugar-free” foods
- Naturally occurring in many fruits/veg



D-xylitol



D-arabitol



adonitol



Polyol Examples

- Sugar alcohols:
 - Sorbitol, mannitol, maltitol, xylitol, erythritol, etc.
 - Often end in “-ol”
- Fruits:
 - Apples, apricots, blackberries, cherries, nectarines, lychees, pears, plums, prunes, watermelon, avocado
- Vegetables:
 - Cauliflower, mushrooms, snow peas



Polyol-Rich Foods



Oopsie

- Fruits contain both glucose and fructose
- Xylitol and Erythritol are polyols
- Shiritake noodles are very, very high FODMAP (miracle noodle)



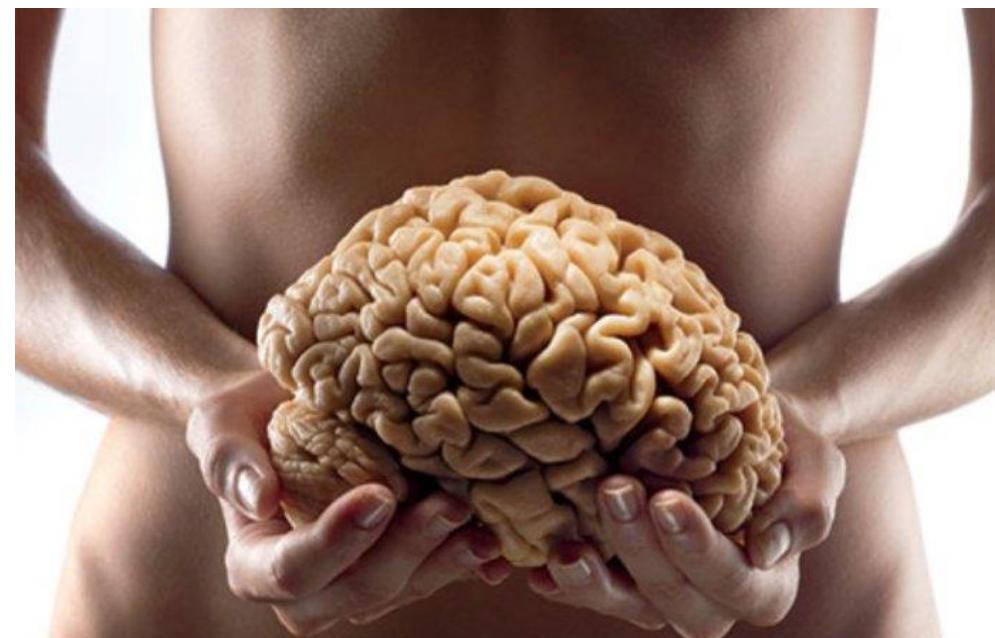
FODMAPS, GAPS, and SCD

- The GAPS diet removes disaccharides and polysaccharides (Glucose, Fructose, and Galactose are allowed)
- The SCD diet removes disaccharides and polysaccharides
- Monosaccharides are the only sugars in SCD / GAPS
- The Low FODMAP diet lowers mono/di/oligo saccharides, polyols, and theoretically fructose
- The diets are *similar* but implemented differently
- SCD and GAPS often encourage repopulating diverse digestive bacteria
- The elemental diet and juice (depending on the juice) or water fasting are also low FODMAP...

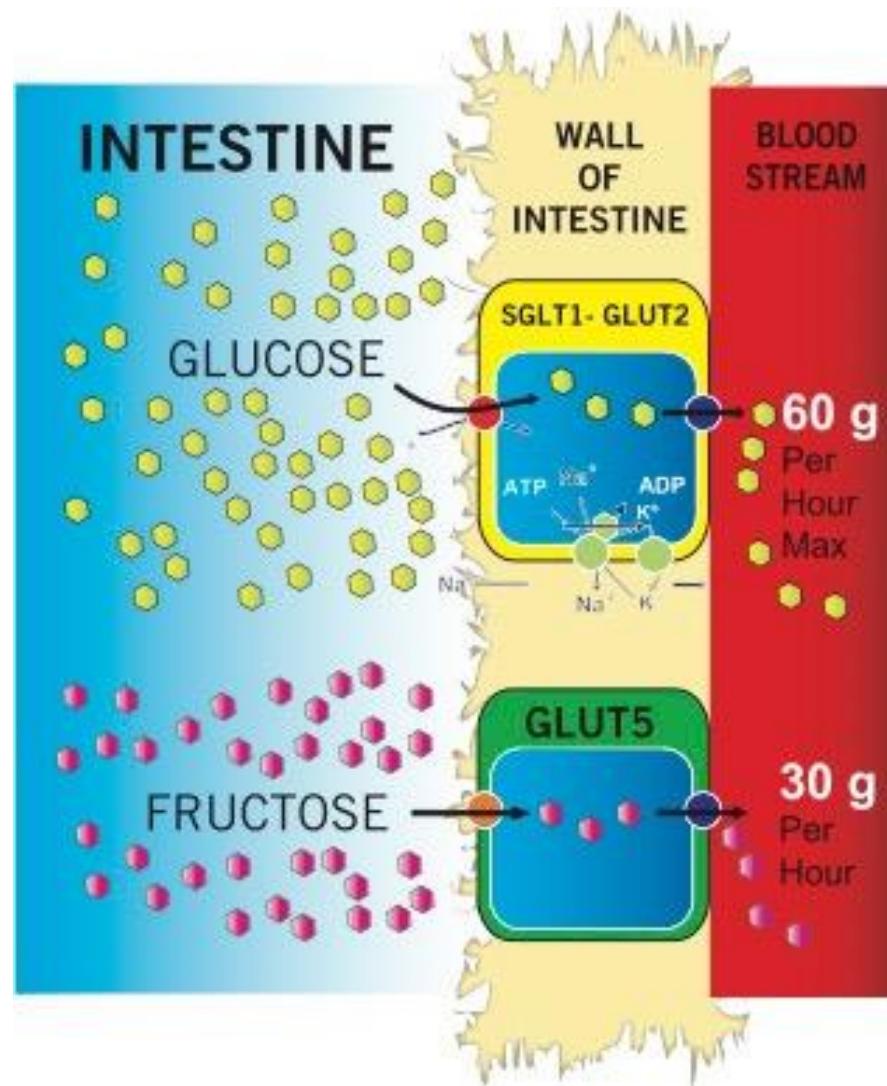


Fructose Malabsorption and the Gut/Brain Connection

- Fructose malabsorption reduces gut motility
- Fructose malabsorption = decreased plasma tryptophan
- Decreased tryptophan = decreased serotonin
- Low serotonin = anxiety, depression, sleep problems
- Individuals with autistic spectrum disorders have been shown to be deficient in fructose AND glucose transporters
- No/low fructose AND no/low glucose may be best for some people

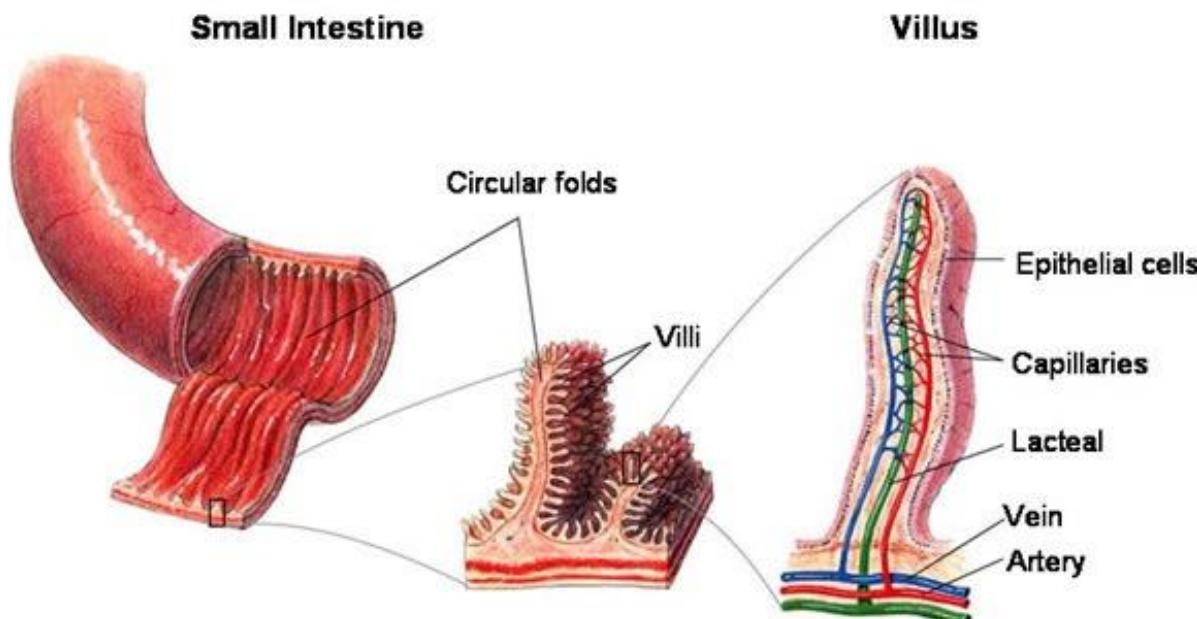


Fructose and Glucose Absorption



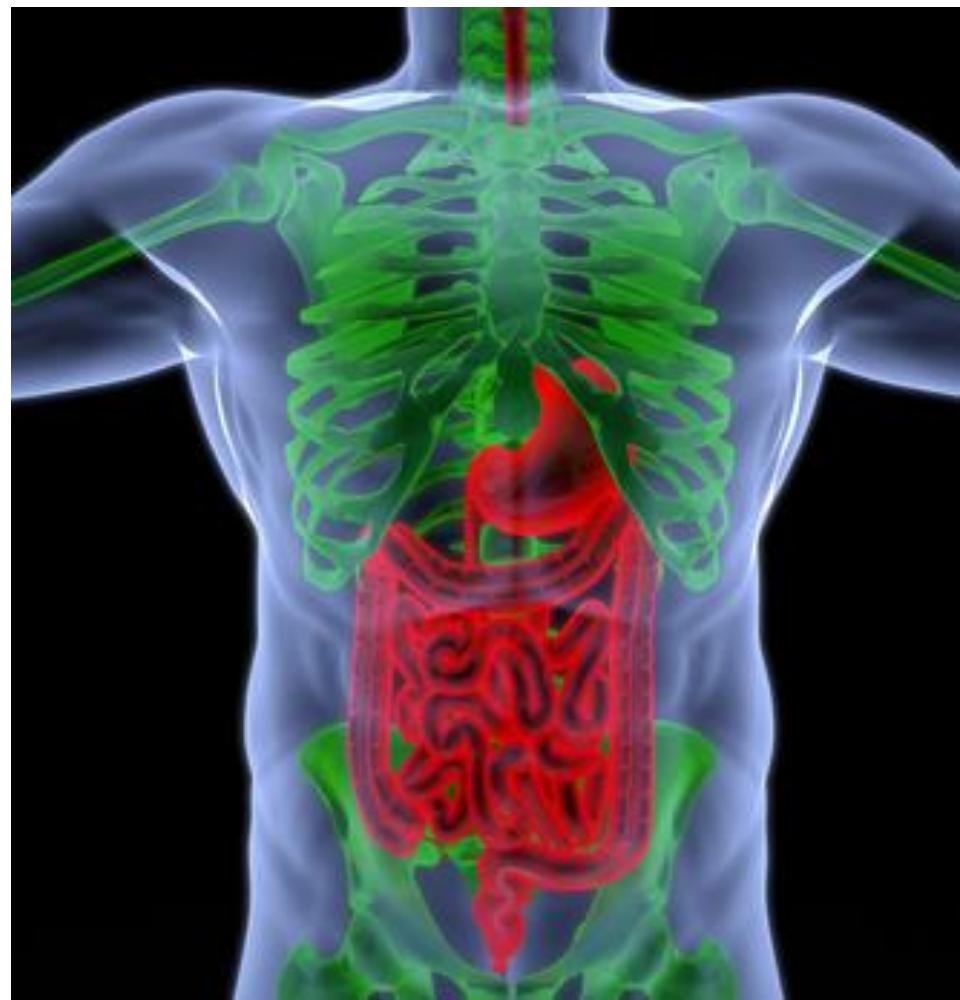
Digestive Enzymes and FODMAPs

- Almost ALL edible plants contain FODMAPs
- FODMAPs are part of a range of carbohydrates
- FODMAPs are digested with the help of Brush Border Enzymes
- BB Enzyme production = FODMAP tolerance



SIBO

- Small Intestinal Bacterial Overgrowth
- Imbalanced bacteria
 - E. Coli, Klebsiella, Clostridium, Staph, Strep
- Produce D Lactic Acid (change environment)
- Alert the immune system
- Grow out of proportion
- Reduce mucosa



Symptoms of SIBO

- Gas
- Bloating
- Fatigue
- Autoimmunity
- Fibromyalgia
- Nutrient deficiencies
- Pain (digestive)
- Symptoms of irritable bowel
- Diarrhea or constipation



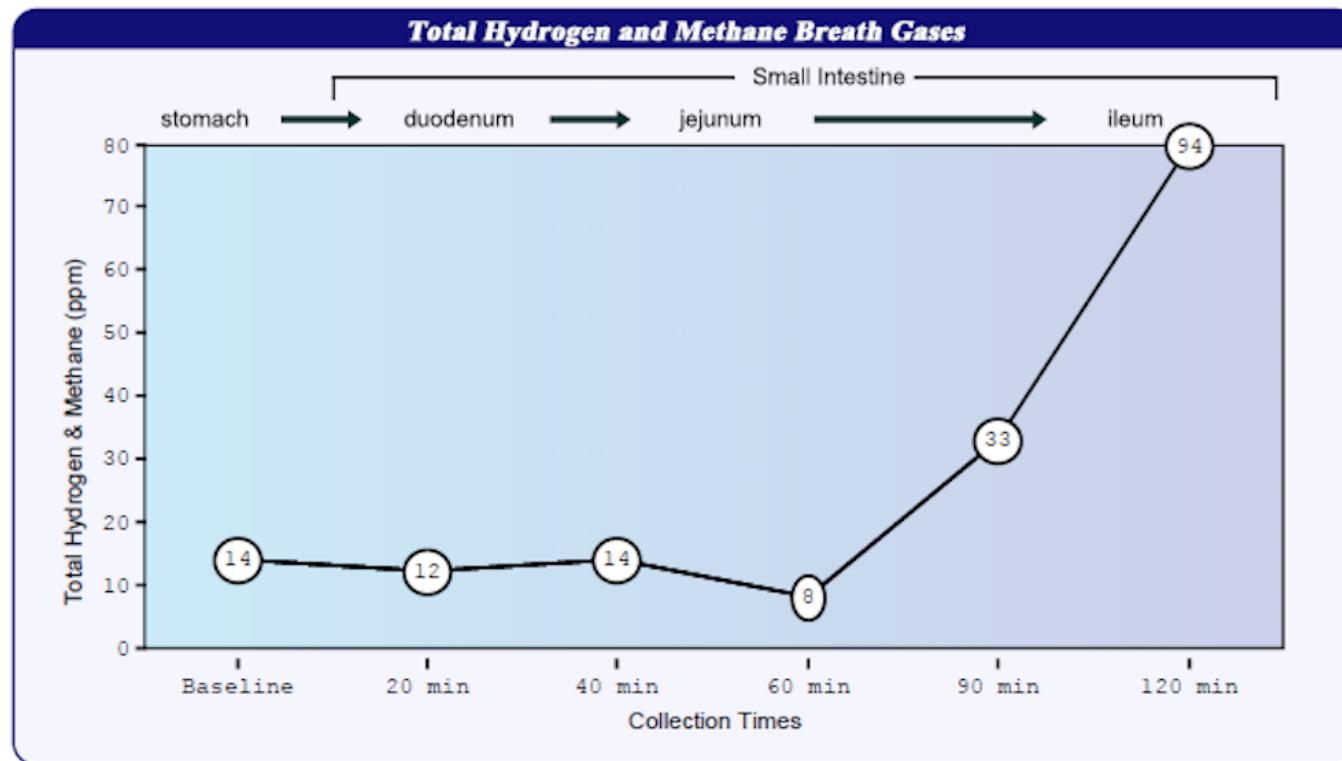
Breath Testing

- Lactulose, lactose, glucose, or fructose = methane or methane AND hydrogen gas
- Breath test
- Can diagnose SIBO
- Can assess severity of SIBO
- Fructose + gas = fructose malabsorption
- Lactose + gas = lactose “intolerance”
- Glucose used as reliably as lactulose



About Breath Testing

- Glucose results = Lactulose results in most cases
- Quintron tests currently most reliable (ask your lab)
- Breath testing preparation foods are not ideal



Low FODMAPs Food Trial

- Alternative to breath testing
- Find an elimination system that works for you
- Some avoid fructose/lactose first, some avoid all
- Nobody digests oligosaccharides and polyols, so best avoid
- Fruits may be included with careful blood sugar monitoring if not producing gas
- Will need a provocation/testing phase
- Foods are meant to be added back to determine tolerance threshold
- Any FODMAP elimination is best short-term

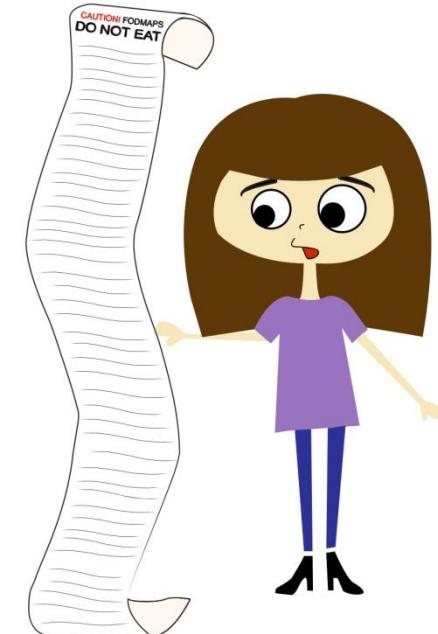
Paleo low-FODMAP diet food list		
Food groups	Safe ⓘ	Be careful*
Vegetables	Alfalfa Bamboo shoots Bean sprouts Bell peppers (capsicums) Bok choy Carrot Cherry tomatoes Cucumber Eggplant Endive Ginger Green beans Kale Lettuce Olives Parsnip Pickle (contains sugar) Seaweed, nori Spinach Spring onion (green part only) Swiss chard (silverbeet) Tomato Zucchini	Avocado (polyol) Beetroot (fructans) Broccoli (fructans) Brussels sprouts (fructans) Butternut pumpkin (fructans) Cauliflower (polyol) Celery (polyol) Fennel bulb (fructans) Green peas (polyol) Guacamole (polyol) Mushrooms (polyol) Sauerkraut (fructans)
		Aristea (fructose) Asparagus (fructose) Cabbage (fructose) Jerusalem artichoke (fructose) Leeks (fructans) Okra (fructans) Onions (fructans) Shallot (fructans)
		Snow pea (fructose, polyols) Sugar snap pea (fructose) Radichio (fructans) Tomato sauces & paste (fructose & fructans)
		Apples (fructose and polyol) Apricots (polyol) Blackberries (polyol) Cherries (fructose, polyol) Dried fruits (fructose) Fruit juices (fructose) Grapes (> 15 servings) (fructose)
		Mango (fructose) Nectarines (polyol) Peach (polyol) Pears (fructose and polyol) Peaches (polyol) Plum (polyol) Watermelon (polyol, fructose)
Fruits	Banana, ripe Blueberry Cantaloupe (rock melon) Cassia (fructose) Honeydew melon Kiwifruit Lemon Lime Mandarin Orange Papaya Peach (fructose) Pineapple Raspberry Rhubarb Strawberry White potatoes Plantain (fructose, verdes) Turnip Rutabaga (swede) Taro, Cassava/yuca White rice	Banana: unripe Longan (polyol) Lychee (polyol) Rambutan (polyol) Grapes (10-15 servings) (fructose)
		Banana: ripe Longan (polyol) Fruit juices (fructose) Grapes (> 15 servings) (fructose)
Starches		Sweet potatoes/yams (polyol)
Nuts		Most nuts and nut butter (cashews, macadamia, pecans, pine nuts, walnuts, pumpkin seeds, sesame seeds, sunflower seeds)
Dairy		Pistachios (fructans) Almonds Hazelnuts
Protein		Fresh cheese (lactose) Milk (lactose) Yogurt (lactose and often fructose too if sweetened)
Fats		Any containing breadings, gravies, stocks, broths, sauces or marinades prepared with unsafe ingredients (read the ingredient list!)
Treats		Pistachios (fructans) Almonds Hazelnuts
Seasonings and other ingredients		Fresh dressings, sauces or marinades prepared with unsafe ingredients (read the ingredient list!)
Drinks and alcohol		High-fructose corn syrup (fructose) Agave syrup (fructose) Honey (fructose) Sugar-free treats (polyol) Artificial sweeteners (can also be a problem for IBS)

* Watch your serving and assess your personal tolerance. **for a low-carb version of the Paleo low-FODMAP diet, limit your intake of fruit, starchy vegetables, tubers/roots and treats and base your low-carb low-FODMAP Paleo diet on non-starchy vegetables, protein and seasonings. – In follow the Paleo dietitian, 2012. All rights reserved.



Implementing the FODMAPs Trial

- **Elimination phase:** Avoid all high FODMAP foods for 2-8 weeks
- **Provocation phase:** Re-introduce one FODMAP category at a time
 - Start with a small serving size (1/2 cup or less)
 - If tolerated, add the category back into the diet and move on to the next category
 - If not tolerated, eliminate from diet and move on to the next category
 - FODMAP reactions can be cumulative... think MEAL totals
 - Oils of high FODMAP foods are fine



It's not forever.

Garlic and shallot oil infusions can add flavor to a Low FODMAPs Diet without provoking symptoms. Thoroughly peel and clean (to avoid any potential contamination from *Clostridium Botulinus* - the bacteria responsible for tetanus and botulism that lives in the soil and is produced as they ferment) 8 - 10 raw garlic or 1/2 cup chopped shallots and place in a glass jar with 1 cup of flax, hemp, or chia oil (olive and other oils will solidify in the fridge). Refrigerate for 24-48 hours and then strain thoroughly. Will keep in the fridge for 10 days.



FODMAPs with Dysbiosis

- SCD/GAPS + low FODMAPs combo = safest to start with
- Dietary and herbal protocols are followed for 8 - 12 weeks
 - Gas, bloating, constipation, diarrhea, and other symptoms should improve
- Breath test can be repeated after 90 days



Improving FODMAP Tolerance

- Remove high FODMAP foods to stop “feeding” wrong bacteria
- Address bacterial overgrowth with a customized protocol
- Improve small intestinal motility
- Re-populate the gut with the proper probiotics
- Steaming or cooking and pureeing low FODMAPs vegetables can improve tolerance
- Test back categories over time



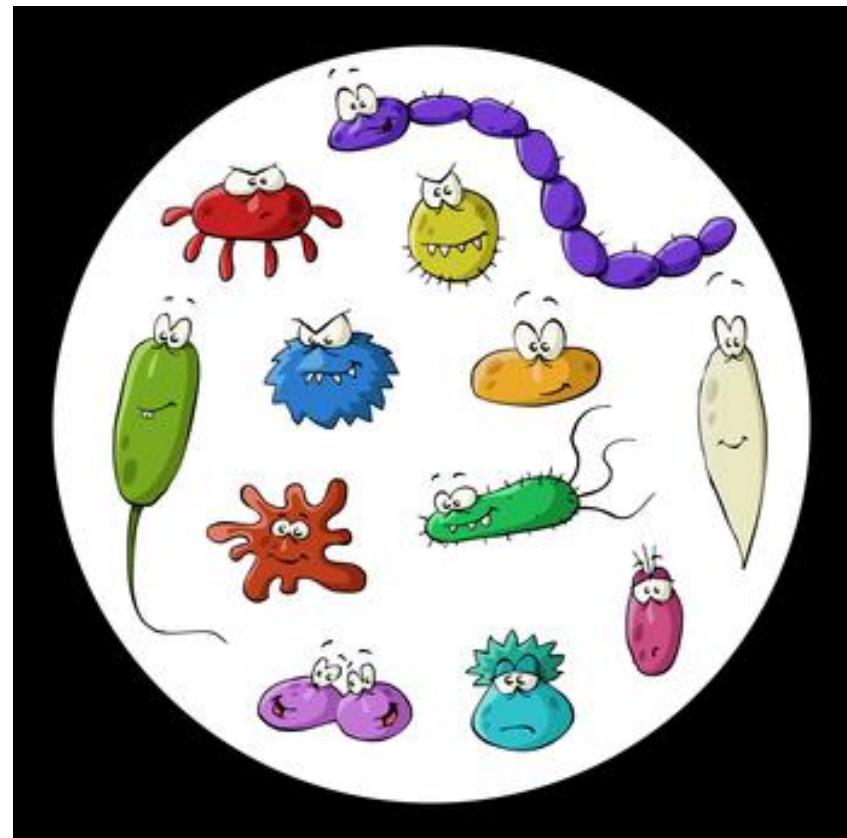
Improving Small Intestinal Motility

- Reduce Clostridia, E. Coli, H. Pylori, Klebsiella, Citrobacter, and other dysbiotic bacteria
- Increase beneficial Lactobacillus bacteria such as Plantarum, Fermentum, and Bulgaricus as well as Bacillus Subtilis and Clausii, bacteria shown to reduce SIBO and improve motility
- Support adrenal health
- Investigate thyroid hormones
- Support liver health and bile production
- Investigate dehydration
- Sleep on an empty stomach
- Support sleep
- Resolve Candida and blood sugar issues
- Look for spinal abnormalities
- Support the nervous system



Bacteria for Small Intestinal Motility

- **Reduce:**
 - Clostridia
 - E. Coli
 - H. Pylori
 - Klebsiella
 - Citrobacter
 - Other dysbiotic bacteria
- **Increase:**
 - Plantarum,
 - Fermentum
 - Bulgaricus
- **Bacillus Subtilis and Clausii shown to reduce SIBO and improve motility**



Low FODMAPs Diet

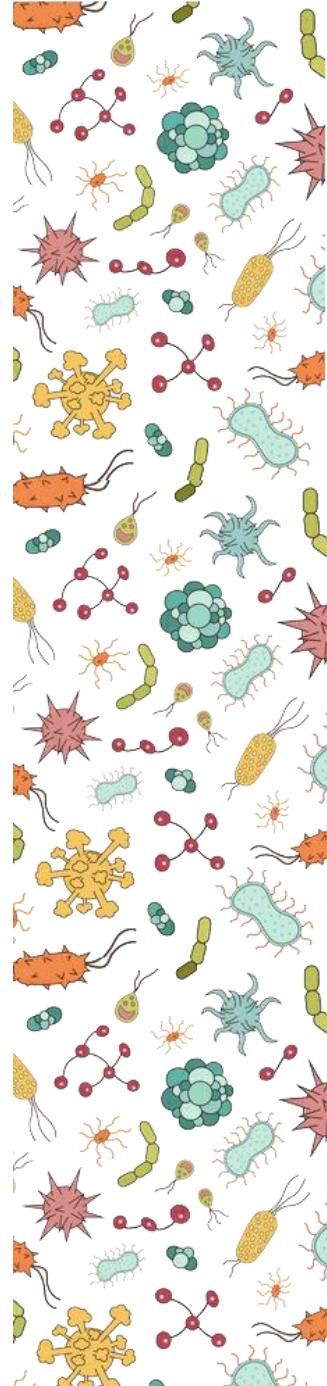
Pros & Cons

■ Pros:

- Can be effective in reducing bacterial overgrowth symptoms
- Can be effective for relief of IBS symptoms

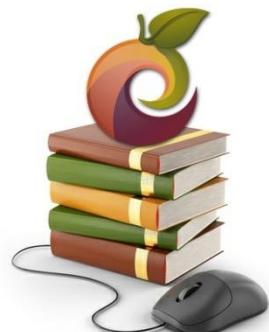
■ Cons:

- Diet alone may not resolve SIBO or IBS
- Adds another level of dietary restriction



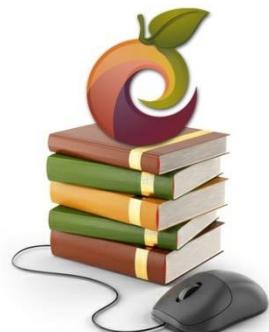
References: 1

- GRAND Program: Dr. Ritamarie Loscalzo, 2015.
www.HappyBellySystem.com
- Julie Matthews, BioIndividual Nutrition Institute:
<http://www.drritamarie.com/go/BioIndividualNutrition>
- Allison Siebecker, SIBO Info
 - list of FODMAPs foods:
<http://www.drritamarie.com/go/SIBODietaryTreatments>



References: 2

- Barrett, Jacqueline S., and Peter R. Gibson. "Clinical ramifications of malabsorption of fructose and other short-chain carbohydrates." *Practical Gastroenterology* 31, no. 8 (2007): 51.
- Davis, Dana. "Adaptation to environmental pH in *Candida albicans* and its relation to pathogenesis." *Current genetics* 44, no. 1 (2003): 1-7.
- De Roest, R. H., B. R. Dobbs, B. A. Chapman, B. Batman, L. A. O'Brien, J. A. Leeper, C. R. Hebblethwaite, and R. B. Gearry. "The low FODMAP diet improves gastrointestinal symptoms in patients with irritable bowel syndrome: a prospective study." *International journal of clinical practice* 67, no. 9 (2013): 895-903.
- Galland, Leo and Barrie, Stephen. "Intestinal Dysbiosis and The Causes of Disease." The Environmental Illness Resource. March 21, 2013. <http://www.drritamarie.com/go/GallandBarrieIntestinalDysbiosis>
- Gearry, Richard B., et al. "Reduction of dietary poorly absorbed short-chain carbohydrates (FODMAPs) improves abdominal symptoms in patients with inflammatory bowel disease—a pilot study." *Journal of Crohn's and Colitis* 3.1 (2009): 8-14.
- Genuis, Stephen J., and Thomas P. Bouchard. "Celiac disease presenting as autism." *Journal of child neurology* 25.1 (2010): 114-119.
- Gibson, Peter R., and Susan J. Shepherd. "Evidence-based dietary management of functional gastrointestinal symptoms: The FODMAP approach." *Journal of gastroenterology and hepatology* 25.2 (2009): 252-258.
- Halmos, Emma P., Victoria A. Power, Susan J. Shepherd, Peter R. Gibson, and Jane G. Muir. "A diet low in FODMAPs reduces symptoms of irritable bowel syndrome." *Gastroenterology* 146, no. 1 (2014): 67-75.
- Hatakka, K., A. J. Ahola, H. Yli-Knuutila, M. Richardson, T. Poussa, J. H. Meurman, and R. Korpela. "Probiotics reduce the prevalence of oral *Candida* in the elderly—a randomized controlled trial." *Journal of dental research* 86, no. 2 (2007): 125-130.



References: 3

- Ledochowski, M., B. Widner, T. Propst-Braunsteiner, W. Vogel, B. Sperner- Unterweger, and D. Fuchs. "Fructose malabsorption is associated with decreased plasma tryptophan." In Tryptophan, Serotonin, and Melatonin, pp. 73-78. Springer US, 1999.
- Manzoni, P., et al. "Oral supplementation with Lactobacillus casei subspecies rhamnosus prevents enteric colonization by Candida species in preterm neonates: a randomized study." Clinical infectious diseases 42.12 (2006): 1735-1742.
- Nikawa, Hiroki, Hiroko Nishimura, Taizo Hamada, Hiroshi Kumagai, and Lakshman P. Samaranayake. "Effects of dietary sugars and saliva and serum on Candida biofilm formation on acrylic surfaces." Mycopathologia 139, no. 2 (1997): 87-91.
- Pereira, Ricardo de Souza. "Regression of gastroesophageal reflux disease symptoms using dietary supplementation with melatonin, vitamins and aminoacids: comparison with omeprazole." Journal of pineal research 41.3 (2006): 195-200
- Romeo, M. G., D. M. Romeo, L. Trovato, S. Oliveri, F. Palermo, F. Cota, and P. Betta. "Role of probiotics in the prevention of the enteric colonization by Candida in preterm newborns: incidence of late-onset sepsis and neurological outcome." Journal of Perinatology 31, no. 1 (2010): 63-69.
- Schwalfenberg, Gerry K. "The alkaline diet: is there evidence that an alkaline pH diet benefits health?." Journal of Environmental and Public Health 2012 (2011).s
- Staudacher, H. M., K. Whelan, P. M. Irving, and M. C. E. Lomer. "Comparison of symptom response following advice for a diet low in fermentable carbohydrates (FODMAPs) versus standard dietary advice in patients with irritable bowel syndrome." Journal of Human Nutrition and Dietetics 24, no. 5 (2011): 487-495.
- Vargas, SERGIO L., C. C. Patrick, G. D. Ayers, and W. T. Hughes. "Modulating effect of dietary carbohydrate supplementation on Candida albicans colonization and invasion in a neutropenic mouse model." Infection and immunity 61, no. 2 (1993): 619-626.
- Wei, J., and Gwynneth P. Hemmings. "Gene, gut and schizophrenia: the meeting point for the gene–environment interaction in developing schizophrenia." Medical hypotheses 64.3 (2005): 547-552.

