What is the purpose of a FODMAP diet?

A FODMAP diet is a 3 step diet used to help manage the symptoms of medically diagnosed irritable bowel syndrome (IBS). IBS is a very common gut problem with symptoms including abdominal pain, bloating, flatulence (gas) and changes in bowel habit (diarrhea, constipation or both).

The aims of the diet are to:

- Learn which foods and FODMAPs you tolerate, and which trigger your IBS symptoms. Understanding this will help you to follow a less restrictive, more nutritionally balanced diet for the long term that only restricts foods that trigger your IBS symptoms.
- 2. Assess whether your IBS symptoms are sensitive to FODMAPs. Not everyone with IBS will improve on a low FODMAP diet. So it is important to understand whether you are among the ¾ of IBS sufferers who improve on the diet, or the ¼ of IBS sufferers who do not experience symptom improvement on the diet and therefore need to consider other IBS therapies.

How to follow a FODMAP diet

A FODMAP diet is a 3 step diet.



1. Low FODMAP Diet

For 2-6 weeks - swap high FODMAP foods for low FODMAP alternatives.

All food groups and nutrients are included.

2. FODMAP Reintroduction

Over 8-12 weeks reintroduce:

- one FODMAP at a time
- one food at a time
- over 3 days

Increase serving size each day and monitor tolerance.

3. FODMAP Personalization

Eventually people will know what they can tolerate and what they cannot.

In the long-term it's a balance between tolerated FODMAP-rich foods and the avoidance of others.

Step 1

In Step 1, you will swap high FODMAP foods in your diet for low FODMAP alternatives. For example, if you normally eat wheat-based toast with honey for breakfast, you could swap to sourdough spelt toast with jam. Follow the Step 1 diet for 2-6 weeks. If your symptoms improved after 2-6 weeks on the Step 1 diet, it is time to move onto the Step 2 diet. If they did not improve, it might be that your IBS symptoms are not sensitive to FODMAPs and you need to consider other therapies, such as stress reduction, over-the-counter medications such as laxatives, fiber supplements, or prescription medications.

Step 2

In Step 2, you continue your low FODMAP diet (as per step 1). However, you will complete a series of 'FODMAP challenges' to identify which FODMAPs you tolerate and which trigger symptoms. FODMAP 'challenges' involve eating a food rich in only 1 FODMAP group daily for 3 days and monitoring symptoms. Keeping a food diary is very useful in this step, as it lists foods that you can use for each FODMAP challenge. These foods are recommended because they contain large amounts of one FODMAP type. For instance, milk is high in lactose, but does not contain any other FODMAPs. Very common foods (such as apple, pear, certain legumes and wheat products) that are high in two FODMAP types are also included as optional challenges. After each 3-day challenge, record how well you tolerated the FODMAP(s).

Step 3

In Step 3, the aim is to relax dietary restrictions as much as possible, expand the variety of foods included in your diet and establish a 'personalized FODMAP diet' for the long-term. In this step well tolerated foods and FODMAPs are reintroduced to your diet, while poorly tolerated foods and FODMAPs are restricted, but only to a level that provides symptom relief. It is recommend that you repeat challenges of poorly tolerated foods and FODMAPs over time to see whether your tolerance changes.

^{*}Information taken from https://www.monashfodmap.com/ibs-central/i-have-ibs/starting-the-low-fodmap-diet/. There is a downloadable app on this website which may help you track foods and tolerances as well as provide tips for food choices.