Executive Summary

Evidence-based practice guidelines for the dietetic management of Crohn’s disease in adults

Produced by the Crohn’s disease Dietetic Development Group

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Purpose of Guideline

These guidelines have been developed for UK based registered dietitians for the dietetic management of Crohn’s disease in adults. The recommendations aim to reduce variation in clinical practice and improve clinical effectiveness and patient outcomes in relation to dietary management. At a time when outcomes in healthcare are of utmost importance, promotion of a specialist dedicated dietetic service is key to providing a high standard of clinical care to patients with Crohn’s disease.

Aim

To produce evidence-based practice guidelines for the dietetic management of Crohn’s disease in adults.

Methods

A Crohn’s disease Dietetic Guideline Development Group (Crohn’s-DGDG) was formed and identified four topics and specific questions necessary to improve patient outcomes in the dietetic care pathway for Crohn’s disease.

(1) As a treatment to induce remission:
   • is exclusive enteral nutrition as effective as corticosteroids?
   • is elemental or non elemental enteral nutrition more effective?

(2) Following induction of remission by nutritional means:
   • are food re introduction diets effective for maintaining remission?
   • which type of food re introduction diet is most effective for maintaining remission?

(3) In stricturing disease, does decreasing dietary fibre (residue) reduce:
   • the risk of bowel obstruction?
   • self reported gastrointestinal symptoms?

(4) Do probiotics, prebiotics or synbiotics:
   • induce remission?
   • maintain remission?

A comprehensive literature search was conducted and relevant studies from January 1985 to November 2009 were identified using the electronic database search engines Cinahl, Cochrane
Library, Embase, Medline, Scopus and Web of Science. Using SIGN criteria, relevant papers were critiqued and evidence statements, recommendations, good practice points and research recommendations were developed.

Results

Fifteen papers were analysed and formed the basis of these guidelines.

- Although corticosteroids appear to be more effective, enteral nutrition (elemental or non-elemental) can be offered as an alternative option to induce Crohn’s disease remission.

- Following a course of enteral nutrition, food reintroduction diets may be useful to structure food reintroduction and help maintain disease remission.

- Dietary fibre is contraindicated in the presence of strictures due to the risk of mechanical obstruction.

- The use of probiotics, prebiotic or synbiotics is not currently supported.

Conclusions

The guidelines provide details of how to achieve successful dietary management of Crohn’s disease in adults.