

Food choices and beliefs in adults with inflammatory bowel disease in Sweden

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Dietary modification is common in IBD self-management, but restrictive eating may pose nutritional risks. This study investigates dietary choices and perceptions among Swedish IBD patients and explores differences between Crohn's disease (CD) and ulcerative colitis (UC). To our knowledge, this is the first study of its kind in a Swedish context

Conclusion

Food-related beliefs influence dietary choices in patients with IBD in Sweden, and many patients adjust their diet due to their condition. This tendency appears to be more pronounced among CD patients than UC patients. UC patients are significantly less likely than CD patients to receive dietary advice, revealing a gap in care.

Methods: A 42-item questionnaire was distributed to all adult members of the Swedish patient organization Mag- och tarmförbundet diagnosed with IBD. The survey assessed dietary food choices and patterns, motivations for dietary changes, and perceived effects on disease symptoms and progression.

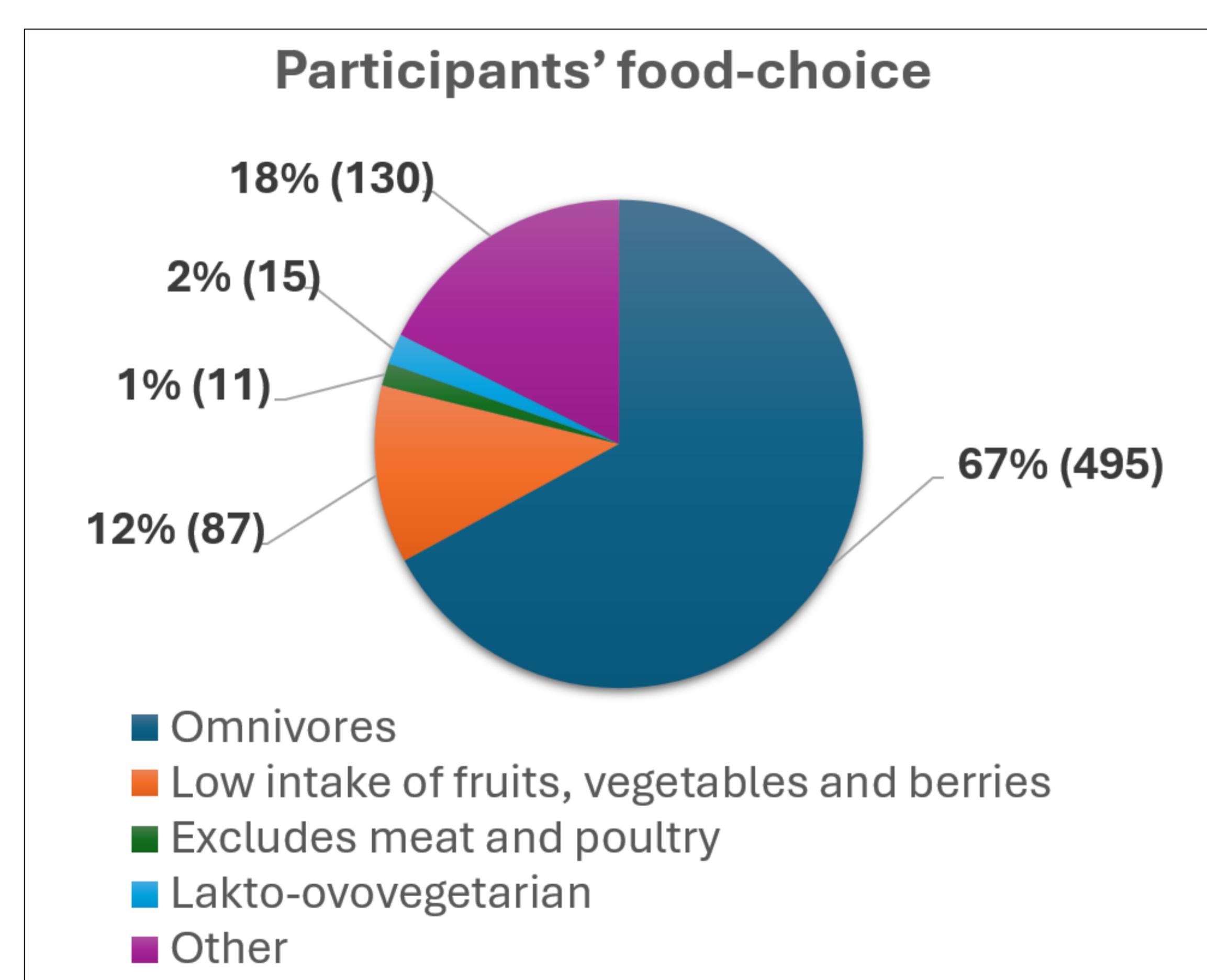


Figure 1. Proportion and number of participants selecting the response option that best describes their food choices (%), n).

Results

Of 2,193 invited participants, 738 (34%) individuals completed the questionnaire, Crohn's disease (CD) 361 (49%); ulcerative colitis (UC) 377 (51%). There were no significant differences in age, sex, or education between people with CD and UC, however, it was more common with longer disease duration in CD than UC (median [IQR]: 27 [12–40] vs 20 [9–31] years, $p < 0.001$).

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The majority identified themselves as omnivores (Figure 1) but one in five patients follow a specific diet, with no significant difference between CD and UC. A significantly higher proportion of CD patients, than UC patients, reported changing their diet due to IBD and avoiding certain foods to prevent flare-ups, Diagram 1.

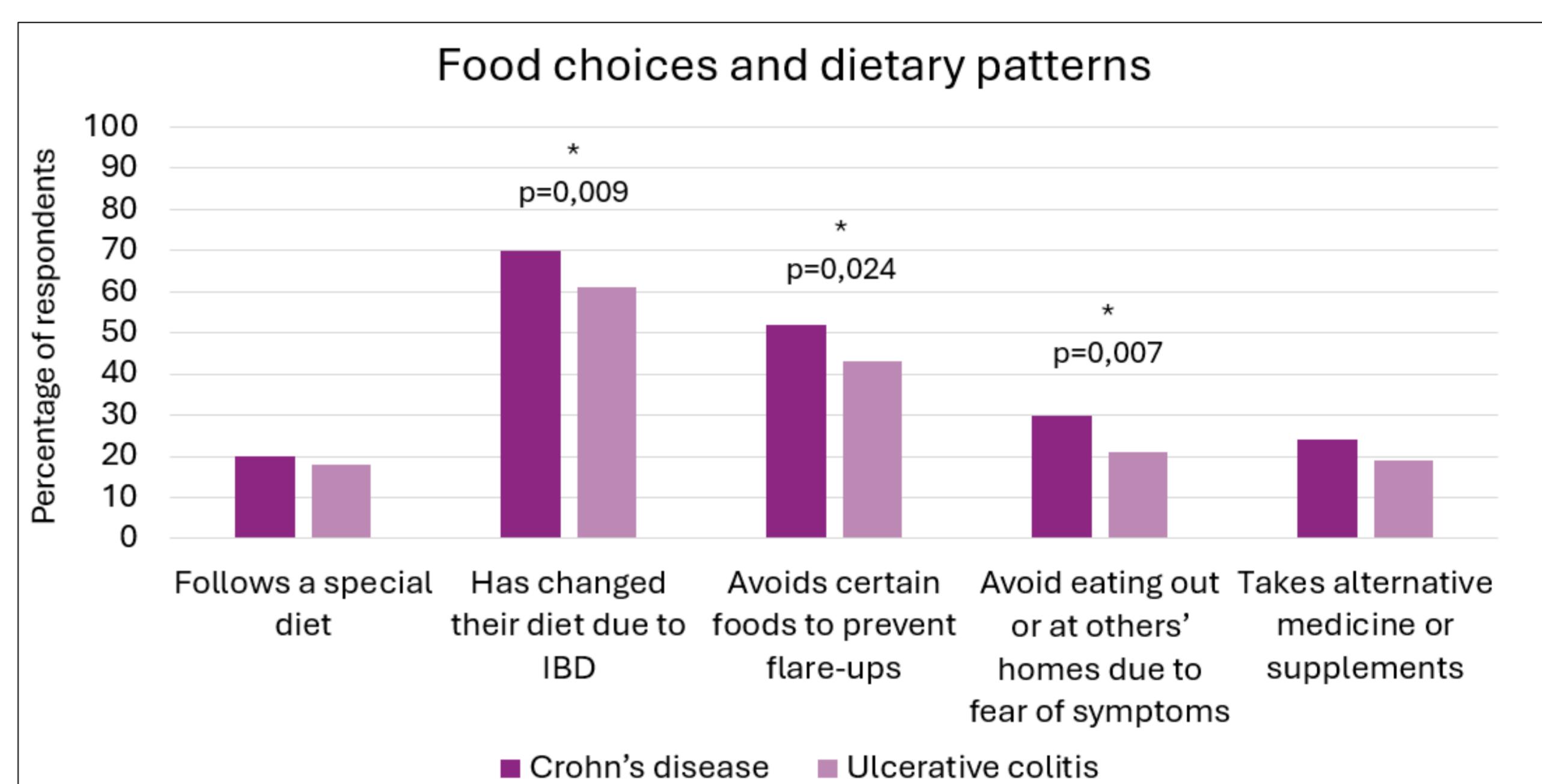


Diagram 1. Comparison of food choices and dietary patterns between CD and UC. Pearson chi-squared test. (* P-value < 0,05). (n=738)

A significantly higher proportion of CD patients, than UC patients, believed that avoiding certain foods improves symptoms and that diet could cause flare-ups, Diagram 2. Half of the respondents believe that diet is equally or more important than medication.

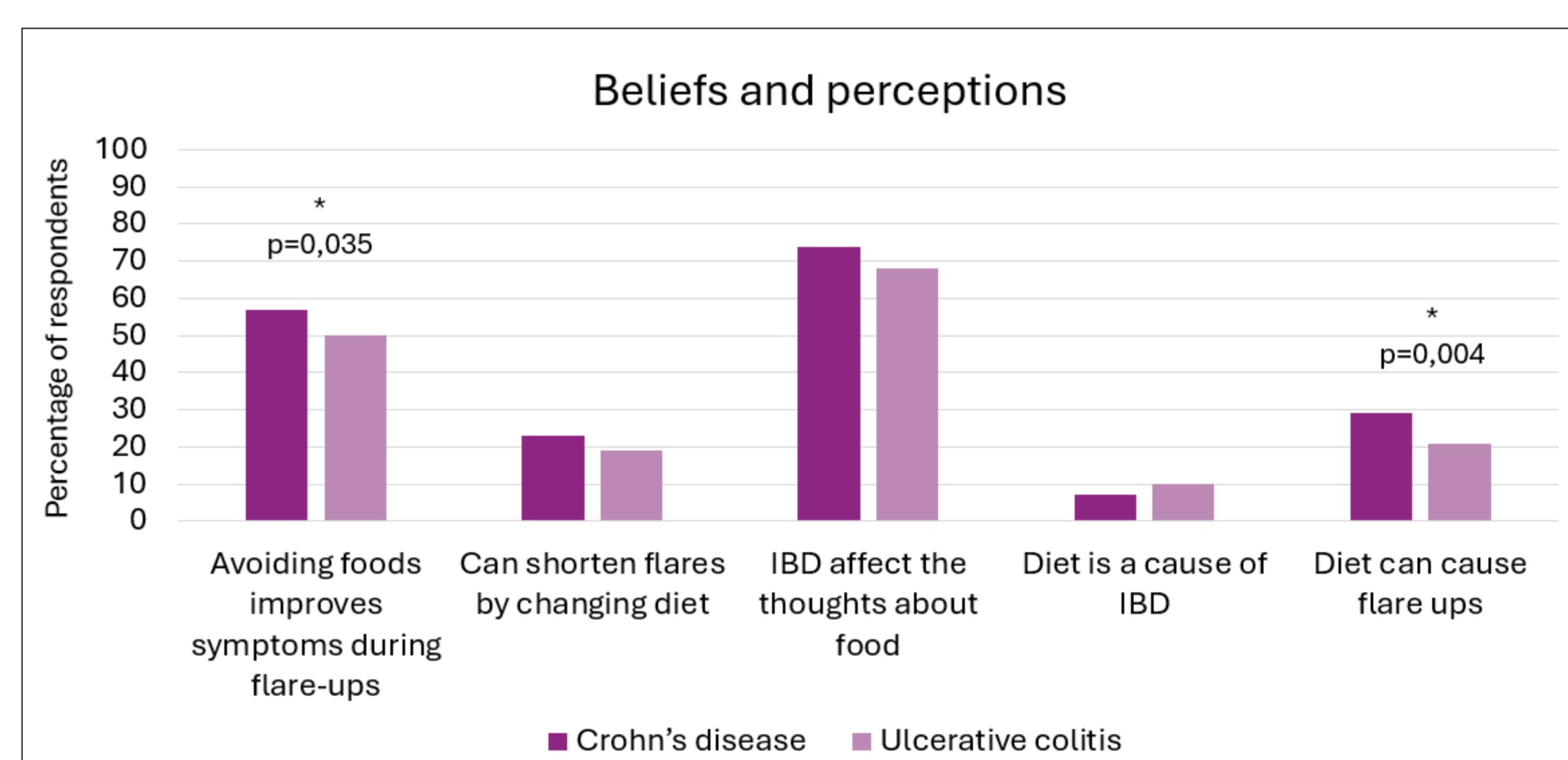


Diagram 2. Comparison of beliefs and perceptions between CD and UC with Pearson chi-squared test. (* P-value < 0,05). (n=738)

Overall, 38% (n=278) of IBD patients have not received dietary advice related to their disease. This was significantly more common among UC patients (187, 50%) than among CD patients (91, 25%, $p < 0.001$). Among those who received dietary advice, 7% (n=52) reported that it was not provided by healthcare professionals.