# RDs In Practice Round Table Discussion The Nuts and Bolts of Therapeutic Diets for EoE January 22, 2015

### **Facilitators**

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## **Objectives**

1. Discuss nutritional management of patients following elimination diets.

2. Identify practical tips for following an elimination diet – what works and what doesn't.

3. Discuss strategies for effective education and nutrition counseling in EoE.

### **Nutrition Assessment**

- Dietary intake and food pattern
  - Dietary exclusions, food preferences, frequency and amount consumed, eating behaviors, preparation methods (scratch vs. processed)
- Readiness of child and family to start elimination diet
- Assessment of growth, medical history, feeding history
- Ongoing nutrition assessment throughout treatment process
- Food records

### **Dietary Treatment Approaches**

Dietary Treatment	Method	Benefits	Challenges
Elemental	All food is removed. 100% of nutritional needs are met thru elemental formulas Initial diet: 4-8 weeks	<ul> <li>Highest success rate of inducing remission</li> <li>Provides balanced nutrition including micronutrients</li> </ul>	<ul> <li>Amount needed to be consumed to meet kcal needs</li> <li>Removal of all foods</li> <li>Social events surrounding food</li> </ul>
Empiric elimination	Top known allergens are removed from diet Ex: SFED (dairy, wheat, egg, soy, peanuts/tree nuts, seafood); FFED (dairy, wheat, egg, soy) Initial diet: 8-12 weeks	<ul> <li>No allergy testing required</li> <li>FALCPA requires manufacturers to clearly label the top 8 allergens</li> </ul>	<ul> <li>Include major foods in Westernized diets</li> <li>High risk of nutritional inadequacy</li> </ul>

Guided elimination	Food(s) eliminated based off of allergy testing results Initial diet: 8-12 weeks	May identify culprit food that would otherwise not be removed using an empiric approach	Validity of allergy testing
Combination diet	Use of elemental formula in combination with an elimination diet	• Improve nutritional quality of diet	

### **Common Issues Seen with Elimination Diets**

Issue/Concern	Strategies to address issue
Cross contact	Educate on potential sources and how to avoid. Eating out at
	restaurants, shopping, home
Label Reading	Review FALCPA, encourage label reading every time product
	is purchased
Social events	Plan ahead, bring allergen friendly food for parties, celebrate
	using non-food items
Feeding Difficulties	Learn pt's challenges, work with foods that pt will accept, no
	force feeding, know when to refer
Poor adherence	Peer support, positive language/setting, assure adequate
	education

### **Helpful Resources**

- CHOC's EoE website <a href="https://www.choc.org/eoe/nutrition">www.choc.org/eoe/nutrition</a>
- Food Allergy Research & Education (FARE) <u>www.foodallergy.org</u>
- Kids with Food Allergies <u>www.kidswithfoodallergies.org</u>
- The American Partnership for Eosinophilic Disorders www.apfed.org
- American Academy of Allergy Asthma & Immunology www.aaaai.org

# **Questions for participants**

What have you found helpful to improve compliance & or success for families following elimination and/or elemental diets?

What educational tools have you implemented to teach patients/families about elimination diets?

What are some common nutritional concerns you encounter?

What supplements are you recommending for patients on elimination diets?

What do you do when a patient will not accept an elemental formula and is not meeting kcal/pro needs thru diet alone? High kcal smoothie recipes? High kcal additives? NGT?

What do you recommend regarding advisory claims on food labels? Do you allow these foods while on an elimination diet?