



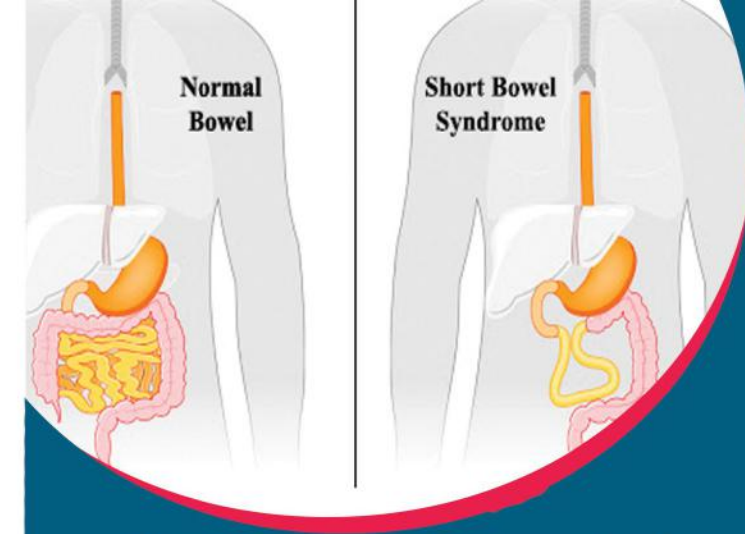
Short Bowel Syndrome

Short Bowel Syndrome

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- ▶ Soluble fiber such as peas, beans, oatmeal, barley, citrus, berries, apples, Brussels sprouts, sweet potatoes
- ▶ In case of damage to the large intestine, a large amount of water should be consumed to compensate for dehydration and electrolyte imbalance.
 - ▶ Avoid simple carbohydrates, (especially fruit juices)
 - ▶ Eat more complex carbohydrates such as bread, pasta, potatoes, cereals, and rice (the type of carbohydrate prescribed helps reduce bloating, bloating, and bone extraction.)
- ▶ Consumption of proteins in red meat, eggs, fish, and poultry are recommended; Due to their complex structure for digestion.
- ▶ Consumption of fat is important because of the production of beneficial fatty acids as well as the solvent of fat-soluble vitamins; Therefore, unsaturated oils such as olive, coconut, and sunflower oils can be used.
 - ▶ It should be noted that the presence of high fat in the diet causes the loss of calcium, magnesium, copper, and zinc; Therefore, we must consume the optimal ratio of fats and carbohydrates.
 - ▶ People with short bowel syndrome may develop osteoporosis, so vitamin D and calcium supplements are a must.



- ▶ Zinc deficiency has been associated with diarrhea.

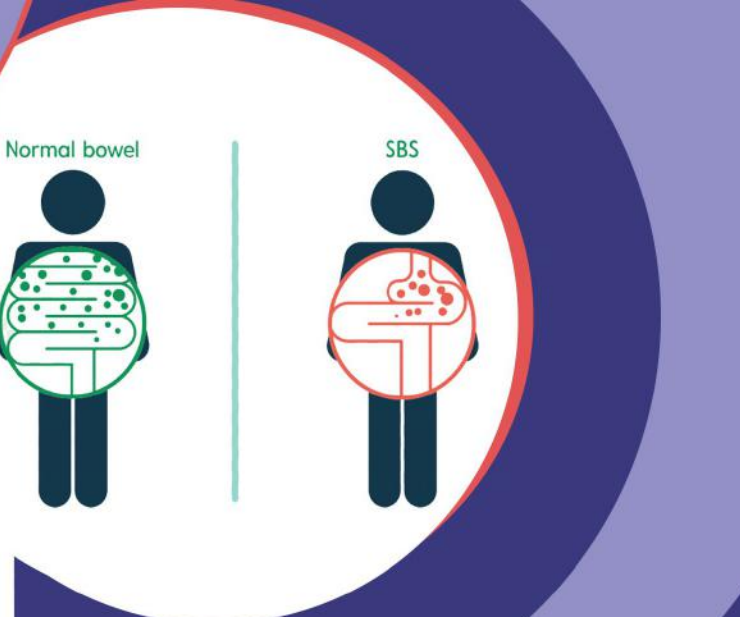
The amount of energy received from food depends on the length of the remaining intestine.

Patients with short bowel syndrome, if they do not eat, cause cholecystitis (inflammation of the gallbladder) due to lack of gallbladder contraction. Therefore, despite the malabsorption of food, people should try to consume food.

Frequent meals, elimination of foods and osmotic drugs, use of oral fluid treatments, and other interventions are recommended.

▶ Risks of intravenous nutrition in patients with short bowel syndrome

Catheter infection (a narrow tube used for intravenous feeding), Sepsis (a complication caused by the body's reaction to infection), Liver disease, Decreased quality of life



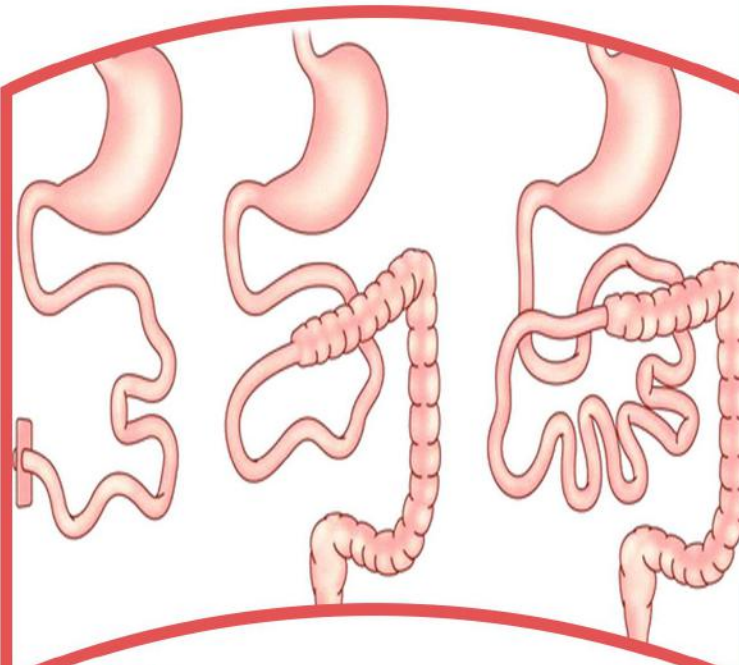
Short bowel syndrome is an inadequate absorption capacity due to a reduction in the length or function of the bowel after surgery and removal of part of it. Loss of 70% to 75% of the small intestine leads to short bowel syndrome, which is defined as 100 to 120 cm of the small intestine without a colon or 50 cm of the small intestine remaining with the colon.

► Complications of short bowel syndrome
 Osteoporosis, Lactic acidosis in which the symptoms of acidosis include lethargy, confusion, Unexplained acidosis, Liver disease

may need intravenous nutrition to supply at least some of their nutrients and fluids. The use of small, frequent snacks is a method of oral administration in these patients. But patients with short bowel syndrome can only meet part of their nutrient and fluid needs this way.

► Consequences of short bowel syndrome

Micronutrient and macronutrient malabsorption, Frequent diarrhea, Steatorrhea, dehydration, Electrolyte imbalance, Weight Loss, Developmental disorders in children, Excessive gastric secretion, Oxalate kidney stones, Cholesterol gallstones



People with short bowel syndrome should:

- Follow a low oxalate diet
- If you have steatorrhea, use coconut oil, olive oil, soybean oil
- Oral re-administration solutions (ORS) are best used.

► Medical nutrition therapy in short bowel syndrome

3 Patients with very short bowel movements