

Managing bloating and wind

Introduction

People with Inflammatory Bowel Disease (IBD), which includes Crohn's Disease and Ulcerative Colitis (UC) often report feeling bloated. Many also worry about excess wind and its effects, such as tummy gurgles and flatulence (breaking wind.)

This information sheet answers some of the queries most often raised about bloating and wind. It also contains suggestions and tips other people have found useful in managing these symptoms.

What causes bloating?

If your stomach or abdomen feels bloated, it may well be due to excess wind. However, there are also other possible causes, such as water retention, which may be linked to a hormone imbalance.

Bloating is also a common symptom of Irritable Bowel Syndrome (IBS). This is a separate condition from IBD, but both UC and Crohn's are associated with a greater risk of IBS. So it is quite possible for people with IBD also to have IBS. This is probably because of short-term damage to nerve endings in the intestine, caused by inflammation. It is not uncommon, for example, for an attack of UC to be followed by irritable bowel symptoms, including bloating, that may last for several months.

Research has indicated that people with IBS often have increased gut sensitivity, and may feel bloated even when they do not have an excess of wind. IBS attacks may be triggered by stress, and it is thought that this increased sensitivity could be the result of the stress affecting the normal communications between the brain and the gut.

It has also been suggested that bloating is the result of a sluggish bowel, and that this is more likely to occur if you have constipation,

also sometimes a feature of Crohn's or UC. Eating a lot of fatty food can delay stomach emptying and this too may cause bloating and discomfort.

You may also experience bloating if you have adhesions (scar tissue) as a result of many operations

What causes wind?

It is normal to have gas in your intestine and there is no evidence that people with IBD have more gas than the general population. We each produce about 5 litres of gas a day through the normal processes of digestion. Some of this is reabsorbed into the bloodstream and is eventually breathed out; the remainder has to be expelled as wind, and most of us probably break wind some 20 -30 times a day, even if we are not aware of it.

Excess or troublesome wind is generally thought to be caused by:

- Swallowing too much air while eating or talking. Some people swallow air as a nervous reaction, (this is called aerophagy). Certain foods and aerated (fizzy) drinks can also contribute to this.
- Increased or over-production of gas by the bacteria in the large intestine, (colon). Most of the gas produced is used by other bacteria, in beneficial ways, but the system can get out of balance.
- Poor digestion and absorption of foods in the small intestine, (often a feature of Crohn's disease) so that more undigested food reaches the large intestine, which can also lead to increased gas production. This is most likely to happen with foods high in carbohydrates, especially sugars and starches, such as vegetables, beans, pulses, fruit, and whole grains.

- Foods that contain Sorbitol, (a common artificial sweetener), which can also be poorly digested.
- Lactose intolerance, (difficulties with digesting the sugar in cows milk), which is caused by the absence of the enzyme lactase.

It has also been suggested that some people may simply have more bacteria than others, or bacteria that are more efficient at producing gas.

How can I reduce excess wind?

Unfortunately, there is no one simple solution: what works for one person may not work for another. However, people have generally found at least some of the following ideas helpful.

➤ Think about the way you eat

- Create a relaxed environment when eating, as nervous tension at meal times limits digestion.
- Eat slowly with your mouth closed to avoid gulping down air along with your food.
- Avoid talking too much during mealtimes to reduce air swallowing.
- Chew each mouthful thoroughly, especially if the food is high in fibre.
- Try to take a 30-minute break after eating to digest your food.
- Eat small, regular meals (perhaps 5-6 a day), as an empty bowel produces more wind and gurgles.
- Avoid a pattern of not eating much during the day and a large meal late at night, leaving food 'sitting' in the system.

➤ Avoid foods that may affect you

Some foods, such as baked beans, onions, cabbage, pulses and whole grains are well known to be 'gassy', although what produces a lot of wind for one person may not for another. You may know that you have an intolerance of or are sensitive to certain foods or perhaps ingredients. If you are having a problem identifying which foods are causing bloating and wind, it can be helpful to keep a food diary for a week or two. Note down everything you eat and drink and how it makes you feel.

It may be worth experimenting by cutting out certain foods for a short period (4-6 weeks) to see this if this helps. Remember how important it is to maintain a good balanced diet however: cutting out a number of foods can mean missing out on valuable nutrients. If you want to try a longer term or more extensive exclusion diet, talk it through with your IBD team.

Consulting your doctor is also a good idea if you suspect you may be lactose intolerant. There are several types and levels of intolerance and correct diagnosis is essential to identify the right solution.

Some research studies have suggested that in people with IBD, food sensitivities that occur during a flare up may be only temporary. As the gut lining heals, the food can be re-introduced without any problems. This can happen with lactose intolerance too, and you may find that in remission, milk and milk products can be reintroduced.

If your food intolerance does seem to be long term, and you decide it would help to give up a particular food, look for a suitable substitute. For example, if you want to avoid wheat, try eating rye bread, rice, millet, oatcakes or porridge. If you are avoiding dairy products, try soya, rice or oat milk, and take a calcium supplement.

As a general rule ensure that all vegetables are well cooked. Insoluble fibre can be a particular problem so remove the skins and seeds from all fruits and vegetables before eating. If you do feel you need to increase the level of fibre in your diet, for example during a period of IBD remission, do so very slowly.

Other foods that have been widely associated with bloating and wind include:

- Food with a high fat content, such as sauces. These, and eggs, often tend to produce bad smelling gas.
- Excessive animal fats. Try using fats from oily fish as a healthier alternative.
- Deep fried foods.

- Refined and sugary foods, such as confectionery, biscuits, and processed breakfast cereals.
- Foods containing fructose or Sorbitol used as an artificial sweetener.
- Hot spicy food, particularly if you are not used to it.

NACC produces a booklet, *Food and IBD*, which provides further information on how food affects IBD and suggestions for healthy eating with UC and Crohn's.

➤ **Drinking**

- Drink plenty of water, ideally 2 litres a day (about 8 glasses). If you don't like the taste, add some fresh juice. If you prefer hot drinks, add lemon and a little honey to hot water.
- Avoid caffeine in coffee, tea and cola. Even decaffeinated coffee may be a problem, but try decaffeinated tea, green tea, herbal and fruit teas.
- Avoid fizzy carbonated drinks (or pour and allow to stand for 10 minutes), beer and lager. Excess alcohol intake can cause more wind than usual the next day for some people.
- Avoid drinking with meals if possible, or if you like some liquid, slowly sip water at room temperature.
- Don't be tempted to wash down half-chewed food with a gulp of drink even if you are in a hurry.
- Avoid drinking from a straw to limit air swallowing.

➤ **Other tips**

- Avoid chewing gum, as this makes you swallow air.
- Try to avoid stress, which can make you gulp air. When you are tense, practise slow breathing.
- Avoid sitting for long periods. If sitting at work, take regular breaks (at least every hour) to stretch the legs and abdomen.
- Try to take regular exercise. Even a 20-30 minute brisk walk four times a week can improve your bowel function.
- Gently, but firmly, massage the abdomen to release trapped wind. This is most

effective when lying down. Place a hand on the inside of your right hip and work your way up to waist level, then across the navel and down to the left hip, continuing in a clockwise movement. This is also soothing and relaxing.

- In bed, try lying face down with a pillow under your tummy.
- Practise anal sphincter exercises to help improve control of wind. (Contact NACC for further information).

How can I get rid of smells?

If you find you cannot control passing a lot of wind, you might find some of the following ideas helpful:

- Try to ensure that the room you are in is well ventilated.
- Light a scented candle, an aromatherapy oil burner (try lavender or lemon oil) or incense stick.
- Try striking a match and then blowing it out immediately and allowing the small plume of smoke to drift into the room.
- Place bowls of pot pourri around the house, remembering to renew frequently, as the scent fades.
- Use aerosol air fresheners with care – they can smell worse than the smell you are trying to disguise! Also, some people are sensitive to freshener spray.
- Try a solid block freshener that works all the time, or a freshener that releases a fragrance at regular intervals.
- Use neutralising sprays or gels that help to eliminate rather than mask odours, such as Day-Drop Lemon Spray or Neutradol Spray or Gel (available from chemists and supermarkets), Auricare Odour Eliminator or Fresh Drop Smell Stop (available online).
- Wear underwear or pads that absorb gas. These are available online at www.flat-d.com and www.myshreddies.com.
- Use a seat cushion that filters gas. This is available from www.GasBGone.co.uk

What else may relieve symptoms?

Some people have found herbal remedies helpful in reducing wind or the smell of wind.

The following suggestions have not been scientifically proven to relieve symptoms, but may be worth trying.

- Aloe Vera capsules or gels
- Charcoal tablets
- Cranberry juice
- Fresh parsley
- Herbal infusions, such as camomile, fennel or peppermint
- Peppermint oil

Research is continuing into the role of the bacteria in the colon, in particular those which may be 'friendly' or beneficial. There is some evidence for probiotics (mixtures of friendly bacteria taken by mouth) having a positive effect on IBS symptoms, although it may depend on the strain of the bacteria involved.

Some people have found taking probiotic supplements helpful in reducing flatulence and wind. Probiotic yoghurts in particular have been found to be useful in reducing symptoms of lactase intolerance including flatulence. Brands of yoghurt and drinks containing probiotics are now widely available in supermarkets as well as health food shops. Many of the supplements mentioned above can also be bought on-line.

Further Reading

Banish Bloating by Suzannah Olivier. Simon & Schuster, 2001

Bowel Control: Information and Practical Advice by Christine Norton and Dr Michael Kamm. Beaconsfield Publishing, 1998

Good Food for Bad Stomachs by Dr HD Janowitz. Oxford University Press, 1998

The Good Gut Guide by Stephanie Zinser. Thorsons, 2003

The New Eating Right for a Bad Gut by Dr James Scala. Plume, 2000

Probiotics for Crohn's and Colitis by Peter Cartwright. Prentice Publishing, 2003

Further Help

The NACC Information line: 0845 130 2233 is open Monday to Friday from 10am – 1pm (excluding Bank Holidays). There is an answerphone service outside of these hours.

The NACC-in-Contact Support Line: 0845 130 3344, is open Monday to Friday from 1pm – 3.30pm and 6.30pm-9pm (excluding Bank Holidays). Trained volunteers who have all had personal experience of IBD are available to talk with anyone with IBD.

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We hope that you have found the information helpful and relevant. We welcome any comments from readers, or suggestions for improvements. References or details of the research on which this publication is based can be obtained from NACC at the address below. Please send your comments to Helen Terry at NACC, 4 Beaumont House, St Albans, Herts AL1 5HH – or email h.terry@nacc.org.uk.

The National Association for Colitis and Crohn's Disease (NACC) is a voluntary Association, established in 1979, which has 30,000 members and 70 Groups throughout the United Kingdom.

Membership of the Association costs £12 a year. New members who are on lower incomes due to their health or employment circumstances may join at a lower rate. Additional donations to help the work of the Association are always welcomed.