What is Enteral Nutrition?

Rebellions of the belly are the worst. Frances Bacon

This book describes a treatment for Crohn's disease that involves using **enteral nutrition**—special liquid formulas—to get into remission, stay in remission, gain weight, and reverse nutritional deficiencies.

Enteral nutrition has been prescribed by doctors for patients with Crohn's disease since the late 1960s, and has been evaluated in numerous clinical trials from the 1980s through the present. It has been tested in kids and adults, in patients with both recent and long-standing disease, and in individuals with many different complications of **inflammatory bowel disease** (**IBD**). Like all treatments for Crohn's, it doesn't work for everyone. But when it does, here are some of the things it can do:

- Enteral nutrition can induce remission in people with active Crohn's disease in as little as two weeks.
- Enteral nutrition can succeed in people who don't respond to steroids and those who can't discontinue steroids without relapsing.
- Enteral nutrition can restore normal growth patterns in kids who have stopped growing because of Crohn's.

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 - Enteral nutrition can promote healing in diseased areas of the intestinal tract.
 - Enteral nutrition can do these things with almost no side effects.

So why haven't I heard about enteral nutrition?

Well, there is one disadvantage to enteral nutrition. If you want to use it to get into remission from Crohn's (as opposed to taking it simply to maintain remission or gain weight), you can't eat or drink anything except the liquid formula for approximately two to eight weeks. You won't starve—the formula fills you up and provides all of your nutritional needs—but you do have to be willing to give up your regular diet temporarily.

Gastroenterologists in United States rarely mention enteral nutrition as a treatment option because they think it is too difficult to ask patients to give up normal food for a while. You are more likely to have heard about enteral nutrition if you live in Canada, Europe, Japan, or Israel. Doctors in these regions tend to have more experience using enteral nutrition for Crohn's, and are more likely to be aware of its benefits.¹ The Japanese, for instance, use enteral nutrition as a primary therapy for active Crohn's disease and prefer it to steroids.² In the United Kingdom, a survey of the members of the British Society of Gastroenterology found that 59% of the specialists who responded had prescribed enteral nutrition for their patients with Crohn's.³ But in most countries, enteral nutrition is not used as often as it might be. If doctors consider prescribing it at all, they tend to offer it primarily to children because of its beneficial effects on growth, and rarely mention it as a treatment possibility to their older patients.

In part, this useful option may be overlooked because it's just too simple in a modern medical world that focuses on the complex. It's not a hot new treatment; it's been around for a long time, and many of us—doctors included—tend to look for the newest high-tech solution. To be honest, it's also much easier for a patient to take a medication every day than to comply with a liquid diet. Doctors realize this, and want to prescribe the treatment that is easiest for the patient. There are a fair number of drugs available to treat Crohn's disease, and they can be very effective for many individuals. So why not use them?

The trouble is that the medications don't work for everyone, and even when they do, can have unpleasant side effects. They can also lose their beneficial effects over time. That means that patients with Crohn's disease need to know about *all* their treatment options, just in case the simplest and most convenient methods fail. Enteral nutrition isn't appealing to everyone and doesn't work for everyone. Nevertheless, it is important for patients to know that it exists. That's why I wrote this book.

What will I learn?

- In this chapter, we will learn what enteral nutrition is, who developed enteral nutrition and why (hint: NASA was interested!), and explore some of the hypotheses on why it works.
- In Chapter 2, we will look at the pluses and minuses of the drugs most commonly used to treat Crohn's disease, and explore why and when you might want to consider using enteral nutrition instead.
- In Chapter 3, we will discover the benefits of enteral nutrition in children with Crohn's.
- In Chapter 4, we will explore the advantages of enteral nutrition for adults, including its use during pregnancy.
- In Chapter 5, we will review the use of enteral nutrition for specific complications of Crohn's disease, such as perianal disease, fistulas, and strictures.

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- In Chapter 6, we will examine whether enteral nutrition is useful in ulcerative colitis, indeterminate colitis, irritable bowel syndrome (IBS), and celiac disease.
- In Chapter 7, we will learn about the different types of enteral nutrition, and find out how each of us can choose a formula that is right for us.
- In Chapter 8, we will get the scoop on how to get started and what to expect during a course of enteral nutrition.
- In Chapter 9, we will examine whether people with Crohn's can benefit from other dietary regimens and supplements such as fish oil, probiotics, and low- or high-fiber diets.

Understanding enteral nutrition

"Enteral nutrition" is not a phrase that's in most people's vocabulary, so before looking at what enteral nutrition does and how it can help you, let's take the time to better understand what it is.

Broadly speaking, enteral nutrition refers to any form of food or beverage delivered directly to the gastrointestinal tract, whether it is chewed and swallowed like normal food, or delivered through a tube directly into the stomach or intestines. Believe it or not, if you ate a sandwich and an apple and a soft drink for lunch, you were consuming enteral nutrition!

But when the term "enteral nutrition" is used in a medical context, it has a more specific meaning. In that case, it refers to special liquid diets used to feed patients who are too sick to eat regular food, or who would benefit medically from replacing normal food with a liquid formula, even if they can eat without difficulty. The formulas are supplied either as powders ready to be mixed with water, or already premixed (in liquid form). They provide all the nutrients that you would otherwise obtain from a varied diet.