

Good Digestion Diet

In the era of “supersize,” diet and exercise remain the most effective path to improved digestive health

The truth hurts, says Dr. Mohan Rengen of Pennsylvania Gastroenterology Consultants in Camp Hill.

But so does obesity. “It hurts every organ system,” says Rengen.

And it has become the Number one problem in his medical office thanks to the poor American diet.

“Everything is supersized now. That’s why America is supersized,” he says.

“Portion sizes, the processing of foods and the availability of fast foods are killing our society. It is not uncommon to see a 300-pound or 400-pound patient [in the office] almost every day,” Rengen says.

That’s where the truth comes in. “I have to address weight and diet with them, but it is a challenge. They give every reason why they can’t exercise,” he says.

But there is not a magic pill, Rengen says.

“It’s diet and exercise. Portion control. You have to watch everything you put in your mouth,” he says. He also gives patients the option of bariatric surgery, such as a gastric bypass.

“Do I offend some people and they don’t come back? Probably, but the truth hurts. I don’t care if you’re mad at me. I just want you to get better and lead a healthy lifestyle.”

Kimberly Furman, a physician assistant at Gastroenterology Associates of York, says they are seeing problems related to unhealthy diets, also.



By Maria Coole

"More patients are complaining of bowel irregularity, and I suspect this is due to diets high in fat and processed foods and low in fiber and fresh fruits and vegetables. Most respond to fiber therapy after other causes of digestive problems have been ruled out," she says.

"We should all consume 20-35 grams of fiber daily for general digestive health," says Furman.

The best type of fiber to eat is soluble fiber, says Rengen. According to gastrointestinal professional societies, soluble fiber is better to use than insoluble fiber. Soluble fiber is found in vegetables, fruits, legumes, rice, oatmeal, barley and sweet potatoes, says Rengen. These foods will relieve the extremes of digestion, says Rengen; for example, they can help to regulate irritable bowel syndrome and constipation.

Soluble fiber is not digested, but it dissolves in water. Insoluble fiber, however, does not dissolve in water. Insoluble fiber worsens irritable bowel syndrome, says Rengen. Foods such as

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PREVENTING COLON CANCER

March is National Colorectal Cancer Awareness Month. Here are tips from Kimberly Furman, a physician assistant at Gastroenterology Associates of York, to help prevent colon cancer.

THINGS TO AVOID

RED MEAT OR PROCESSED MEATS are associated with an increased risk of colon cancer. Barbecuing meat increases risk. This is thought to be because hydrocarbons and other carcinogens are produced from proteins in the charring process. **ALCOHOL** also will increase the risk if the amount of alcohol exceeds a 12-oz. beer, a 4-oz. glass of wine or a 1.5-oz. shot of liquor per day.

THINGS TO DO

STAY ACTIVE. A meta-analysis of 52 studies showed there was a 24 percent reduction in colorectal cancer in active versus non-active people. Ask your doctor about **ASPIRIN THERAPY.** There is evidence that supports the protective effect of aspirin and other non-steroidal anti-inflammatory drugs. Since these drugs can also have a detrimental effect on the upper digestive tract and small intestine, consult your physician before taking aspirin. **CAFFEINE INTAKE** might be protective. This is unresolved but a meta-analysis of 12 control studies and pooled analysis of 13 prospective studies suggest a link between high rates of coffee consumption and a reduced risk of colon cancer.

wheat bran, Fiber One, shredded wheat and raisin bran are insoluble fiber, he says.

People who don't eat fiber foods, says Rengen, are asked to take Metamucil, psyllium, Benefiber or Citracel.

Rengen recommends patients see dieticians when they need help creating a healthy diet. He sends many patients to the dieticians at Giant grocery store in Camp Hill because not only do they create the diet, they create a shopping list and will take the patient through the store to show them where to find the foods. This costs \$20, but the person gets a \$20 gift card after they are done, says Rengen.

Lifestyle changes with and without bariatric surgery have made huge differences in some of Rengen's patients.

One 25-year-old woman was overweight, had high blood pressure, was diabetic and had arthritis pain, he says, but in working with a dietician, the young woman made drastic lifestyle changes. She started going to the gym three to four days a week. Within a year, she lost about 30 pounds and was able to go off hypertensive medication, he says.

Another woman who came to see Rengen was having chronic constipation, and she was morbidly obese. After trying a change in diet and adding exercise, the woman had a gastric bypass, he says.

"She was 250 pounds when I met her. Now she is down to 110. She is a completely different person, energetic, happy...off many medications," says Rengen.

What bothers Rengen the most is when he can't help somebody. "We do everything to help them. If I can't help them, I'll find someone who can. That's my philosophy." *SS*

Low-Fat, High-Fiber, Easy Banana-Strawberry Sorbet

Serves 4

INGREDIENTS:

4 bananas

1 cup sliced strawberries, fresh or frozen

1/2 cup tropical fruit punch or guava drink

Fresh strawberries and mint leaves
for garnish

PREPARATION:

Peel the bananas, place in a plastic bag and freeze until firm. When ready to serve, slice the bananas into chunks. Place the bananas, 1 cup of the strawberries and the fruit punch in a blender or food processor. Puree until smooth. Freeze until soft. Garnish with strawberries and mint leaves.

THE PROS & CONS OF PROBIOTICS

THERE ISN'T A LOT OF DATA to support the use of probiotics, but both Gastroenterology Associates of York and Pennsylvania Gastroenterology Consultants in Camp Hill use probiotics with their patients and find them to be useful. Dr. Mohan Rengen of Pennsylvania Gastroenterology Consultants says his practice uses probiotics with patients who have irritable bowel syndrome. They recommend the supplement Align or Activia yogurt. Rengen says he tried the advertised "Activia two-week challenge" and likes the yogurt. "I think it works."

But as far as studies go, the only known ailments that probiotics help are pouch disease, which sometimes happens after the colon has been removed, and with infectious diarrhea, says Rengen. Probiotics is a culture of bacteria, says Rengen, and it can't hurt to use because you are replacing harmful bacteria with a beneficial culture. But using them can get expensive, he says, and we can live without them. Kimberly Furman points out that there are considerable differences in the preparations, doses and therapeutic activity of the various commercial preparations. "The results of one probiotic cannot be applied to all probiotics," she says. "Large, well-designed trials are needed to clarify the role of probiotics in treatment of gastrointestinal disorders. In our practice, because probiotics are safe and do provide benefit to some individuals, we recommend [them] as an adjunct to treatment in certain digestive disorders."