

INFORMATION SHEET

NUTRITION FOR ENDOMETRIOSIS

22 June 2021



ENDOMETRIOSIS AT A GLANCE

Endometriosis is a condition where tissue similar to the endometrium (the lining of the uterus) grows elsewhere in the body. This tissue responds to reproductive hormones where oestrogen stimulates patches forming superficial, lesions or endometrioma (ovarian cysts). Inflammation is generally present, and adhesions (scar tissue) can also form in response. Endometriosis within the muscle tissue of the uterus is known as adenomyosis, typically characterised by an enlarged uterus and heavy menstrual flow as well as pain at time of period.

Dietary and lifestyle changes may help to improve endometriosis symptoms and some people find that eating certain foods tend to trigger or relieve their symptoms.

The experience of endometriosis symptoms is different for each person, as well as each person being unique in their food preferences, lifestyle, medical history and treatment and therefore there is no universal diet for endometriosis.

However, a person with endometriosis might consider reducing foods that either causes inflammation or raises oestrogen levels, both of which may contribute to endometriosis or its symptoms. However, more research is needed to establish the link between endometriosis and diet.

The best way to determine which dietary changes may help you is to keep a food and symptom journal, recording everything that you eat throughout the day as well as any symptoms you experience. A clear pattern may not emerge right away so it's best to keep a food journal for 4-6 weeks.

FOOD THAT MAY POSITIVELY AFFECT ENDOMETRIOSIS

To fight inflammation and pain caused by endometriosis, consume a nutrient-dense, well-balanced diet that's primarily plant-based and full of vitamins and minerals. Ensure that the following foods are in your diet:

- fibrous foods, such as fruits, vegetables, legumes, and whole grains
- iron-rich foods, such as dark leafy greens, broccoli, beans, fortified grains, nuts, and seeds
- foods rich in essential fatty acids, such as salmon, sardines, herring, trout, walnuts, chia, and flax seeds
- antioxidant-rich foods found in colourful fruits and vegetables, such as oranges, berries, dark chocolate, spinach, and beets – aim for a rainbow of colours

Plant-based proteins, lean meats, and healthful fats may also help. Healthful fats are available in many foods, including:

- salmon
- other fatty fish
- tree nuts such as walnuts and almonds (note not peanuts as these are legumes)
- avocado
- olive oil
- olives

If you do not eat fish, it is possible to introduce omega-3 fatty acids into the diet using supplements. These can be purchased at a pharmacy or bought online.

You may find from your food diary that some of your symptoms may be triggered by certain foods and eliminating these from your daily food intake may be helpful in reducing your symptoms of endometriosis.

After eliminating foods for a month it may be possible to slowly re-introduce specific foods to see how your body tolerates them. Elimination of foods can be difficult for some people, because it involves avoiding a high number of food types, including:

- dairy
- gluten
- processed foods
- added sugars

It is recommended to continue your food diary to monitor your symptoms after removing certain foods to determine if your symptoms improve, stay the same or worsen after reintroducing something.

Some people have found the following to be helpful in managing symptoms:

Gluten-free

Gluten is a protein found primarily in the grains; wheat, barley, rye and oats and is also found in beer, bottled condiments, sausages and is present as a thickening in many shop bought sauces.

Many people have reported some type of non-coeliac gluten sensitivity with symptoms such as flatulence, bloating and disturbed bowel function, similar to some of the endometriosis bowel symptoms.

A 2012 study suggested that 75% of people had improved pain perception in all areas and improved quality of life, with no worsening of pain in the remaining 25% after following a gluten-free diet for 12 months.

Gluten is not an essential nutrient so if you remove gluten from your diet and you feel better for it and have reduced symptoms then this is a good outcome.

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FODMAP

FODMAP aims to allow the gastrointestinal system to heal by eliminating certain carbohydrates which are potentially irritating. FODMAP is a short-term dietary modification rather than a long-term lifestyle change.

A doctor or dietitian can help plan the FODMAP elimination program. They can help to track symptoms and identify potentially problematic foods. They can also make sure that it is appropriate for specific medical or health situations.

Preparation is crucial for success with being gluten-free or FODMAP. Planning out each meal, as well as shopping and preparing it ahead of time, can make it much easier to stay on track.

FOODS THAT MAY NEGATIVELY AFFECT ENDOMETRIOSIS

Foods that can influence hormone regulation, particularly estrogen balance, can negatively affect those with endometriosis. In addition, some foods may promote inflammation in the body leading to further pain or progression of endometriosis. These foods include:

- alcohol
- caffeine
- gluten
- processed / manufactured foods which may contain inflammatory omega-6 and artificial preservatives and flavourings
- saturated and trans fat

For further information:

- Insight Endometriosis: Endo 101
- Insight Endometriosis: Endometriosis Symptoms
- Insight Endometriosis: Vitamins and Minerals for Endometriosis

References:

- Non-coeliac gluten sensitivity: piecing the puzzle together
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4406911/>
- Gluten-free diet: a new strategy for management of painful endometriosis related symptoms?
<http://europepmc.org/article/med/23334113>
- Endometriosis in patients with irritable bowel syndrome: Specific symptomatic and demographic profile, and response to the low FODMAP diet
<https://obgyn.onlinelibrary.wiley.com/doi/abs/10.1111/ajo.12594>
- Seeing red: diet and endometriosis risk
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6330594/>
- A prospective cohort study of meat and fish consumption and endometriosis risk
<https://pubmed.ncbi.nlm.nih.gov/29870739/>
- The role of iron in the pathogenesis of endometriosis
<https://pubmed.ncbi.nlm.nih.gov/19165662/>

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