"How to Fiber: Personalizing Fiber Needs for Your Patients Across Different Gastrointestinal Conditions"

Webinar Questions Answered by Kate Scarlata, MPH, RDN, LDN

Please note that these are brief answers to complex questions and are not meant as medical advice. For more complete information, please seek medical advice from your personal healthcare professional.

- Where would you classify the ingredient modified wheat starch? (I have seen this ingredient in a lot of high fiber tortillas on the market and want to know if it is a good source to recommend)—**Answer: Wheat starch can be a source of fiber, if it is resistant wheat starch—which like other fiber sources—escapes digestion in the upper gut. Resistant starch is a long-chain fiber that is fermented by gut microbes, resulting in the formation of short chain fatty acids. It's use can help with satiety and body weight management.**
- Interested in your fiber suggestions with someone with lymphocytic colitis and bouts of diarrhea. **Answer: I personally would try a finely ground psyllium husk, such as Kate Naturals.**
- What is the limit for the amount of protein consumed/absorbed at one time? If fiber impacts the amount of protein absorbed, is it better to eat more than this amount to offset that possible limitation? **Answer: The amount of protein digested at one sitting is variable person to person. Eating fiber with protein doesn't impact how it is absorbed, but it can impact how and where protein is fermented by the gut microbiota. Read more here: https://pubmed.ncbi.nlm.nih.gov/26527169/**
- Are psyllium supplements contraindicated in collagenous colitis? **Answer: Animal studies show a protective effect of psyllium in the colitis model. I am not sure there is much in human studies.**
- What would you recommend to a patient asking about probiotic supplements? Is there a particular brand you recommend for IBS patients? **Align has some data for IBS. I suggest this guide to help with selection based on diagnosis: https://aeprobio.com/wp-content/uploads/2025/01/ProbioticGuide_USA_2025.pdf**
- Are Xylo oligosaccharides fodmaps? **Answer: Not sure these have been officially tested for FODMAP content at this time.**
- How do SCFAs decrease colon cancer risk? **Answer: Archer S, Meng S, Wu J, Johnson J, Tang R, Hodin R. Butyrate inhibits colon carcinoma cell growth through two distinct pathways. *Surgery*. 1998;124(2):248-253.**
- Can you comment on calcium absorption with insoluble fiber? Is it decreased? **Answer: Calcium absorption can be enhanced when certain soluble fibers are fermented by our gut microbes creating SCFA, lowering pH content of the intestine—which increases absorption. Given that insoluble fibers are minimally fermented, I would expect it would not have this specific effect. Note—some food sources of soluble fiber –also contain phytates (legumes, some nuts, some wholegrains—which can impair mineral absorption.**
- Does decreased stool motility increase colon cancer risk? **Answer: read more here: https://coloncancerfoundation.org/increased-risk-of-crc-in-patients-with-slow-transit-constipation-2/**
- I noticed indoles were listed as an example of a deleterious metabolite associated with protein foods. Could you provide more info about this? I am asking since I have been hearing more recently about the benefits of indoles (e.g., hormone imbalance, inflammation, anti-cancer).

Answer: indoles can have negative and positive effects. Here is an article to read: https://pmc.ncbi.nlm.nih.gov/articles/PMC9248744/pdf/fimmu-13-903526.pdf

- Would wheat dextrin be effective for patients experiencing diarrhea symptoms? **Answer: Not sure it has evidence to aid diarrhea. Check out more on fiber here: https://www.jandonline.org/article/S2212-2672(16)31187-X/fulltext**
- What if someone has C diff? Would we want wheat dextrin to solidify the stools? **Answer: Not typically used for this condition.**
- Can you please translate those gram measurements for psyllium husk into volume? How many tsp would three grams of psyllium be? **Answer: It really depends on the type of psyllium—as some are finely ground vs some more granular. They would fill a teaspoon differently**. Check labels.
- Would you also recommend kiwifruit fibers for a patient with IBS-D? **Answer: Not as a diarrhea treatment---but they are low FODMAP—so should be well-tolerated.**
- Would you suggest 2 Kiwi fruits/day for children who struggle with abdominal pain and constipation? **YES!**
- What would you recommend for patients of advanced age with IBS whose diets may already be restricted? Would you try the FODMAP elimination/diet with them? **Answer: Likely no---but I really evaluate each clinical case carefully and individually.**
- Do you have any input on the role of digestive enzyme supplements in dealing with GI symptoms related to fiber and FODMAP plant-based foods? Benefits for tolerance, impact on intestinal permeability, and inflammation cascade? **Answer: There is some evidence that alpha-galactosidase and lactase enzymes can be helpful in IBS patients. Not sure how they would impact permeability and inflammation specifically.**
- Can you elaborate more on what a gentle FODMAP approach might look like? **Answer—it would vary patient to patient –based on what they are eating and how I would modify their specific diet. For example, I had an elderly patient that was consuming applesauce and a fair amount of apple juice—I removed them –added in substitutes –and she has great benefit and symptom benefit. In some patients—I remove garlic and onion only –this can be a great start. "The fodmap simple study" (in my presentation) showed efficacy rates similar to full elimination diet—this was a pilot feasibility study—so not robust data—but still exciting to see! Read more: https://pubmed.ncbi.nlm.nih.gov/38729393/**
- Is it recommended to soak chia seeds first, prior to consumption? **Answer: I don't typically suggest soaking—but there is some evidence that soaking enhances availability of some of the polyunsat fats: https://pubmed.ncbi.nlm.nih.gov/31732052/**
- What do you recommend doing with kiwis for patients who have acid sensitivity due to mouth sores or teeth sensitivity? **Answer: I probably would opt for another food or treatment option.**
- Is there a key time you'd recommend getting tested for SIBO (specifically if the patient is IBS-C) without significant improvement over months of diet/lifestyle interventions? **Answer: timeline is variable depending on other testing and treatments that are necessary to trial. But, if a patient doesn't feel well despite trialing several traditional IBS treatments—I would test for SIBO and IMO. See clinical guidelines here: https://journals.lww.com/ajg/fulltext/2020/02000/acg_clinical_guideline__small_intestinal_bacterial.9.aspx**
- Do we suggest whole chia seeds or ground seeds?—**see above**
- Aren't bananas a good dual fiber source? Bananas seem more readily available, cost-effective, and accepted by people. I'm curious what you think. **Answer: Bananas can be a great fiber**

source. Their fiber content is varied depending on ripeness. For IBS/FODMAP diet needs—ripe bananas can be a symptom trigger due to higher fructan content. Bananas have more resistant starch on the unripe side. I recommend them when my patient tolerate them—which is ~50/50.

- As far as constipation is concerned, no one talks about adding more healthy fats to the diet. I find it very effective. What have you found on this topic? **Answer: I think the data is a bit mixed on this. If it works, go for it! I certainly make sure my patients have a balanced diet—with a nice balance of all nutrients –including healthy fats at each meal.**
- Do you ever use an at-home GI motility test like w/corn kernels or beets? How would you follow up on this topic in sessions with patients, and where to go based on the results the patient has? **Answer: I do not!**
- Thoughts on fiber recommendations for patients with hemorrhoids due to constipation? **Answer: psyllium husk! But also work on proper toileting position and perhaps a pelvic floor PT eval.**
- Can you explain the fiber content in avocados This seems like a soft food that would be easily digested, but it is on the "poorly digestible" list. **Answer: Remember all "fiber" is poorly absorbed—that is part of the definition! But, avocadoes have sugar alcohols too—sorbitol—which can trigger IBS symptoms –IN SOME people –not all! Soft foods can be easier to emptying from the stomach—and may have less insoluble fiber—so it can work well for gastroparesis and even in some with IBD—when soft foods are better tolerated during a flare.**
- What guidance can you provide for someone with IBS-D? **Answer: I often start with psyllium husk, ensure regular meals are consumed, balanced plate with less insoluble fibers---and may modify some FODMAP carbs too, next. Also look at caffeine and alcohol intake which can contribute to diarrhea.**
- So, blending fruits and veg doesn't destroy the benefit of fiber? Or how much does it affect it? **Answer: You are still getting the fiber and polyphenols!**
- Do you have a different approach to treating chronic constipation in athletes? Since the gut sometimes has periods of time where blood flow is prioritized to muscles vs. the gut, it can slow gastric motility. **Answer: I would treat it the same---but of course trial any new diet modifications long BEFORE athletic event (e.g marathon or race)—to find what works best – so ready for the event!**
- Is there a fiber amount you aim for with gastroparesis? **Answer: In the study I shared with good efficacy with small particle size the authors kept fiber at 15 g/1000 kcal.**
- Any suggestions on how long to keep fiber low and/or using fiber for patient with Whipple surgery: **Answer: I don't have the answer for that**.
- I work with patients with various neurological issues so many times, constipation is functional. Would you still say we should recommend soluble fiber? Just concerned about problems with impaction and function. **Answer: Rec more soluble fiber than insoluble. Most of soluble should be consumed by microbes.**
- What are your fiber recommendations and food modifications for people with diverticulosis? **Answer: People with diverticulosis should be consuming fiber intake per IOM.**
  We used to say no nuts or seeds, yet some say they are no longer necessary. What are your thoughts? **Answer: no data to restrict nuts/seeds.**
- So IBD warrants what would be called small particle size fiber, like in GP, correct? **Answer: NO. IBD patient can benefit from blended or cooked down foods DURING *a flare.* Typically**

recommend Mediterranean diet for most of my IBD patients—and of course this has a mix of plants fibers –and not "small particle".

- Curious about IBS-D. Are the recommendations just the opposite of IBS-C? **Answer: Overall diet recommendations would be very similar. Both can benefit from viscosity effects of psyllium. But may add some extra items (kiwi, chia, flax) to help with constipation.**
- Do you have good references for patients to use when looking up types of fiber in foods? **Answer: Not one go to but this is good--: https://theromefoundation.org/wp-content/uploads/Fiber-and-FGID.pdf**
- It varies individuals, but if a patient asks about the amount of water/day, how much do you recommend? **Answer: Typically, 8, 8 ounces—but also suggest they monitor urine color---looking for mostly "hay colored" urine as a good goal.**
- How do you recommend treating constipation in infants (9 months old)? Mainly breast fed but after the introduction of solids, his poops went from nice and soft to hard nuggets with lots of straining. **Answer: I am not an expert in peds at this time—but a little apple juice added to formula—the sorbitol and excess fructose are both osmotic—can help add fluid into gut. Discuss with pediatrician or pedi GI RD of course, first!**
- Have you thought about how hormones affect constipation, such as constipation post-partum? **Answer: Yes, hormones can play a key factor in gut symptoms. The focus on this webinar was the role of fibers---but that would be an interesting topic. We cover the role on hormones in IBS on The Gut Health Podcast, episode # 18, check it out!**
- As a renal dietitian, my patients have to monitor calcium. Do you know the recommendations for a healthy microbiome and calcium balance in dialysis patients? **Answer: I don't ,sorry!**
- What is the difference between raw guar gum vs. partially hydrolyzed guar gum? **Answer: Raw guar gum has longer chain lengths than PHGG. Longer chains sometimes lead to >gas/bloat.**
- Many people want to avoid gums in products. Can you break down the claims and the facts? **Answer: Gums can contribute to excess gas in the gut. In IBS, this can lead to digestive distress.**
- What are your thoughts on digestive enzyme supplementation? Particularly for gastroparesis? **Answer: In clinical practice I have not found them to offer much symptom benefit for my patients—data is not robust, but certainly worth a try!**
- Do you prefer psyllium husk versus guar gum in IBS? **Answer: Psyllium fiber**
- Do you recommend kombucha? **Answer**: **I recommend fermented foods—but per tolerance.**
- I have providers who swear by MiraLAX for everyone and think it should be in the drinking water (haha). Do you have any thoughts on the use of Miralax long term versus really trying to sure up the diet? (for reference, I work in peds GI/intestinal rehab) **Answer: I tend to try diet first.** Polyethylene glycol (PEG) is a widely used laxative that has been anecdotally linked to adverse neurobehavioral effects in some children---but not enough data for FDA to provide a warning. Read this article here: **https://pmc.ncbi.nlm.nih.gov/articles/PMC8509632/pdf/nihms-1721031.pdf**
- Fibe4 vs Metamucil for IBS with diarrhea - what would you recommend? **Sorry not familiar with Fibe4.**
- What is the use of Arabinogalactan fiber from the Larch tree? **No idea!**
- Are there any studies showing carrageenan is harmful for IBS or IBD patients? **Answer: Human studies are ongoing—but there are signals via animal studies that carrageenan and other emulsifiers polysorbate 80, carboxymethylcellulose may not be ideal additives for gut health**

–may increase risk of IBD. Stay tuned for human data from Kevin Wheelan's group at Kings College London.

- If I have a patient with diarrhea who is on TF, what type of fiber would be recommended? We usually use Nutrisource Fiber (previously Benefiber), but would Metamucil be better? **I am not a TF expert, so can't comment specifically on how psyllium husk would work—as it forms a gel—not sure about clogging issues.**
- What do you think of green powders like Bloom or Athletic Greens? **Answer: I am a food first fan when it comes to food and fiber. Don't tend to recommend this type of product.**
- What are your thoughts on the short-chain FOS found in many nutrition supplement drinks? **Answer: source of prebiotics—also FODMAP source—so tolerance may be variable.**
- What are your thoughts on the prebiotic sodas? **Answer: If you drink soda –maybe opt for these—but if you don't drink soda—don't start!**
- What do you think of polysorbate 80's claimed prebiotic effect? **Answer: Not a prebiotic—shown in animal studies to cause gut inflammation and gut barrier dysfunction. https://pmc.ncbi.nlm.nih.gov/articles/PMC4910713/**
- What if you have an allergy to wheat, corn, soy, nuts and shellfish? Is psyllium safe? **A product that is 100% Psyllium husk is made of seeds of plantago ovata not wheat, corn etc)—I would select a brand that uses purity standards USP, NSF etc.**
- Can Metamucil be incorporated into meals or snacks? **Answer: I generally recommend to just mix with water—as it comes flavored. But, I do add 100% finely ground psyllium husk such as Kate's naturals in smoothies and add to my muffin recipes.** Should patients separate its use from medications and foods to avoid risks of decreased availability of the said medications/nutrients? **Answer: Fiber may impact absorption of some drugs—I would suggest they check with their pharmacist.** Our IBD clinic advises patients to take Metamucil ~ 30 minutes before meals to help slow GI transit.
- When we recommend increasing fiber slowly, is there a recommended amount, like increasing by so many grams every so many days? **Answer: I tend to increase by 5 g on day 1 of the first week—stay at that amount for a week, then increase by another 5 g/d—etc.. until at fiber goal.**
- What are your thoughts on glutamine for gut health? **Answer: I use it in post-infectious IBS – some data here: https://pubmed.ncbi.nlm.nih.gov/30108163/**
- Thirty different plant sources in a week is fascinating. Any practical suggestions to get started toward this number? **Answer: It's not that hard really—with some planning. I like to start my patients with a fruit smoothie—with lots of different fruits, maybe carrot or spinach, and add a couple seeds too OR create fun diverse toast toppings: Avocado, tomato, arugula, flaxseed, hemp seeds and extra virgin olive oil (6 plants) OR peanut butter, sliced strawberries, chia and sunflower seeds (4 different plants). Salad variations or stir fries can add great plant variety too!**
- Are there any kiwi supplements? **Answer: Yes.**
- What are your thoughts on "golden" kiwi? **Answer: Love them! You need more of them to have same constipation relief as 2 green—3 golden per day!**
- I often see patients overcomplicating the FODMAPs diet. How would you simplify the diet's instructions into two or three sentences? **Answer: It would be impossible to do that for practical application of the diet. It is a complicated diet that deserves a complex answer.**
- What about papaya to help with constipation? **Answer: Yes, it can help with constipation.**
- How many prunes at a time? **Answer: I usually start with 2 and increase as tolerated.**

- Are there fibers not suggested for bariatric surgery patients with shorter guts. **Answer: I am not aware of fiber modifications for bariatric surgery—I imagine it won't be one-size-fits all—and tolerance can vary from initial post-op phase—to maintenance phase.**
- Does fiber content change w/ freeze-dried fruits/vegetables? **Answer: Not sure of the effect of freeze drying per se—but dried fruit tends to have more fructans, a prebiotic fiber and FODMAP source than raw form.** Does the sorbitol content of plums decrease when fruit is freeze-dried? **Answer: Not sure specific to freeze-drying.**

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