

Preface

At the opening of Chapter 5: Small Intestine Malabsorptive Disorders, our colleagues Parrish, Baumgart, and Goodin observe, “The process of digestion and absorption is a complex cascade of events. As with most other physiologic processes, it is not appreciated until it goes awry.” In this concise statement, these authors identify two of the primary concerns of *The Health Professional’s Guide to Gastrointestinal Nutrition*. This book is intended to help registered dietitian nutritionists (RDNs) and other health care providers understand both the “complex cascade of events” involved in digestion and absorption and the many ways that this process can “go awry.” At the same time, the book is also a practice-oriented guide to what RDNs, physicians, and allied health professionals can do to help identify, alleviate, and/or resolve the nutritional problems that affect the quality of life of our patients.

Part I: Gastrointestinal Anatomy, Diagnostics, and Assessment comprises four chapters that introduce basic and essential concepts in gastrointestinal (GI) nutrition and foreground the discussion in the subsequent parts of the book. The descriptions and illustrations in Chapter 1 can serve an “atlas” of the anatomy of the GI tract and the accessory digestive organs. Chapter 2 surveys many tests and procedures used to diagnose and evaluate GI problems, explaining clearly and succinctly how these tools are used and what they can and cannot tell us about a patient’s health status. Chapters 3 and 4 address the important topic of nutrition assessment—the first step in the Nutrition Care Process—as it relates to the care of individuals with GI disorders and those who are critically ill.

Part II: Nutrition and Gastrointestinal Tract Disorders includes six chapters. The first two provide broader reviews of malabsorptive disorders (Chapter 5) and GI symptoms (Chapter 6), whereas the latter four examine specific GI tract diseases: inflammatory bowel disease (Chapter 7), short bowel syndrome (Chapter 8), irritable bowel syndrome (Chapter 9), and celiac disease (Chapter 10). Part III: Nutrition and Liver and Exocrine Disorders has separate chapters covering diseases of the liver and pancreas (Chapters 11 and 12, respectively). In both Part II and Part III, readers will find a wealth of information on disease etiologies, symptoms, diagnostic techniques, and nutritional implications. These chapters also offer practical suggestions about selecting nutrition interventions that are appropriate for specific patients.

Part IV: Gastrointestinal Oncology and Surgery has three chapters, on oncology (Chapter 13), GI tract surgeries (Chapter 14), and bariatric procedures (Chapter 15). In each chapter, the contributors explore how these medical interventions are used to address serious health problems but can also have significant consequences (sometimes lifelong ones) for the nutritional well-being of patients. As in Parts III and IV, the chapters in Part IV feature research- and evidence-based insights into nutrition assessment and intervention strategies. Additionally, the illustrations in Chapter 14: Gastrointestinal Tract Surgery and Chapter 15: Bariatric Surgery can help readers understand how surgical procedures alter digestion and absorption.

Part V: Systemic Disorders and Specific Populations covers obesity, eating disorders, and food allergy and food intolerance. Chapter 16 identifies what we know (and don’t know) about several weight loss

strategies, including energy- and macronutrient-restricted diets. Given the impact that excess weight can have on health outcomes for our patients, this information is of considerable relevance. The chapter on eating disorders (Chapter 17) presents the latest DSM-V diagnostic criteria (2013) and discusses the role of the RDN on the interdisciplinary team caring for the patient with anorexia nervosa, bulimia nervosa, binge eating disorder, or another type of eating disorder. The final chapter in this part (Chapter 18) emphasizes the crucial distinctions between food allergy and food intolerance and explains the diagnosis and management of various adverse reactions to foods.

Part VI: Therapeutic Interventions for Gastrointestinal Disorders includes eight chapters. The first four (Chapters 19–22) focus on nutrition support, including the uses of enteral and parenteral nutrition in adult and pediatric patients as well as the special challenges of administering nutrition support in the home care setting. The information in these chapters complements and expands upon the coverage of nutrition support interventions for specific GI disorders found in many of the earlier chapters of this book. Chapter 23 is a quick guide to drug-nutrient interactions that may occur with the medications used to treat GI disorders. The next two chapters examine the uses of nutraceutical supplements (Chapter 24) and probiotics (Chapter 25) to treat GI and liver disorders. Although further scientific investigation of these therapies is needed, these chapters can help readers separate the more promising options from those that have not demonstrated efficacy. Finally, Chapter 26 frames the ethical and legal issues that health care professionals may face when providing GI nutrition interventions, particularly when a patient or authorized caregiver chooses to refuse artificial nutrition and hydration. The Appendix to this book lists more information on ethical and legal topics.

There are many ways to use this book. You may wish to start at the beginning and read this book from cover to cover. Alternatively, we encourage you to turn first to the chapters that are most relevant to the types of care you provide or begin with the topics that are least familiar to you. Whatever your strategy, we hope that you find *The Health Professional's Guide to Gastrointestinal Nutrition* to be an essential and helpful professional resource.

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