

Many studies of digestive diseases fail to examine food insecurity

June 2 2022



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A review of studies about the effect of food insecurity on digestive diseases found a dearth of information, even as diet can often be both a direct cause of and a solution for many gastrointestinal conditions.

The findings, publishing June 1 in the journal *Gastroenterology*, highlight an important and understudied area of research, as food insecurity sits within a larger framework of social determinants of health, or the conditions in which people are born, grow, work, live, and age. Difficulty accessing affordable, nutritious foods impacts health outcomes and is an underlying factor that can impact health disparities.

"Within the field of gastroenterology, food insecurity is both relevant and underappreciated," said lead author David Leiman, M.D., assistant professor in the Division of Gastroenterology at Duke University School of Medicine.

"Diets can help manage or treat several GI conditions such as eosinophilic esophagitis, [celiac disease](#), and [irritable bowel syndrome](#)," Leiman said. "The obvious connections between what a person eats and disease control means that having access to the right foods can directly impact health outcomes."

Leiman and colleagues focused on how food insecurity has been examined in research studies involving people with digestive conditions other than liver disease. They analyzed more than 1,900 studies and found only 12 in which food insecurity was evaluated as part of the study.

The identified studies focused on five conditions and symptoms, including GI cancers, inflammatory bowel disease, infections causing diarrhea and vomiting, heartburn, and food allergies.

Overall, these studies found that people with GI conditions who had difficulty affording or accessing food:

- Were more likely to also report feeling depressed;
- Had higher odds of forgoing, delaying, or making changes to

[prescription medications](#), specialist visits, follow-up care, and [mental health services](#) compared to cancer survivors who were persistently food secure;

- More often reported [financial hardship](#) due to medical bills, financial distress, and medication non-adherence for cost-related reasons.

Leiman said a better understanding of the impact that food insecurity has on health, and particularly on digestive health, would improve care and help reduce disparities.

The study authors called for more rigorous research into the role food security plays in causing and treating GI conditions; greater awareness that specialized diets might be out of reach for some patients, and ways to address that; and advocacy for policies that support patients at risk of [food insecurity](#).

"Our analysis demonstrates there is much more to learn," Leiman said. "This topic is intrinsically important to gastroenterologists and our patients, and it should be a priority given its potential to improve patient outcomes."

More information: David A. Leiman et al, Food Insecurity in Digestive Diseases, *Gastroenterology* (2022). [DOI: 10.1053/j.gastro.2022.05.040](#)

Provided by Duke University

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