

Introduction to a New Series



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Nutrients presented to the gastrointestinal tract (GI) are important not only for maintaining the luminal integrity of the GI tract, but also for the health of the whole individual. In addition, the enteric flora that naturally exist in the GI tract benefit from these same nutrients, allowing them in turn to confer important physiologic effects. Therefore, in a patient with a compromised GI tract, alterations in the diet and attention to medications can maintain or improve nutritional status, decrease unpleasant symptoms and ultimately improve overall quality of life.

The topics for this series were selected based on the following:

1. To review nutrition therapies for gastrointestinal disease states associated with significant nutritional insult;
2. To provide practical tips for the care of patients on home nutrition support; and
3. To clarify conflicting information and misconceptions that exist regarding nutrition

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intervention in certain GI disease states. For example:

- Should only those patients diagnosed with celiac disease follow a celiac diet or also those diagnosed with dermatitis herpetiformis?
- What about calcium and vitamin D in patients with lactose intolerance?
- Is enteral feeding possible in patients that have pancreatitis with pseudocyst/s?
- What is refeeding syndrome anyway?
- Does enteral feeding really cause diarrhea?
- How can the clinician minimize the risk of aspiration pneumonia in enterally fed patients?

The goal of the series is to translate evidenced-based nutrition information into practical, cost-effective recommendations and guidelines for the practicing physician. All authors are clinicians who work closely with patients who either require nutrition support or who have serious gastrointestinal disorders in the hospital, outpatient clinics or home care settings.

I hope you will enjoy the series. If there are specific GI-related nutrition topics of interest to the readers of *Practical Gastroenterology*, please feel free to e-mail the series editor, Carol Parrish, with suggestions at: crp3a@virginia.edu. ■