



Understanding lactose intolerance

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Summer is just about to wrap up, but that doesn't mean you have to turn down a refreshing cold scoop of ice cream come autumn time. For some people, the decision is made for them, because they experience troublesome gastrointestinal symptoms 30 minutes to two hours after they eat dairy products.

Lactose intolerance results from a decrease in an enzyme called lactase, which is produced by the cells that line your small intestine. The lactase enzyme breaks down lactose into simple sugars that can be absorbed into the bloodstream.

Without sufficient amounts of lactase enzyme, most of the lactose in foods will travel unprocessed to the colon. At this point, normal colonic bacteria will interact with the lactose and lead to gas, bloating, abdominal discomfort and diarrhea.

Lactose intolerance symptoms are generally mild, but they can sometimes be severe. People who experience these symptoms often wonder what causes lactose intolerance, what can they do about their symptoms, and when they should visit their doctor.

THREE YOU NEED TO KNOW

There are three types of lactose intolerance. Primary lactose intolerance is the most common. Normally, lactase enzyme is produced in high quantities at birth and in early childhood when milk is the primary source of nutrition.

As we age and our diets become more varied, lactase enzyme production decreases. The gradual decrease in lactase production can lead to symptoms of lactose intolerance over time.

The decrease in production occurs in most adults, and it is uncertain why some adults develop symptoms while others

do not. The degree of decreased enzyme product also varies, and symptoms may develop at any time in life.

Secondary lactose intolerance is often associated with surgery, illness or injury to the small bowel. Some causes are self-limiting, such as viral or bacterial gastroenteritis or food poisoning.

Other causes relate to chronic or treatable disorders, such as celiac disease (a gluten sensitivity), Crohn's disease, small bowel bacterial overgrowth, or people who have had small bowel resections.

Congenital lactose intolerance is a rare, autosomal recessive disease. This means both mother and father must pass on the defective gene to their child in order to show symptoms. Both parents don't necessarily have to have congenital lactose intolerance.

Congenital lactose intolerance may start at birth, and is problematic early in life because milk is the primary form of nutrition.

But as we grow, our diets become varied, and these people have similar issues as those with primary lactose intolerance in adulthood.

DAIRY GOOD CHOICES

To stave off symptoms, avoid lactosecontaining food. The job, however, is easier said than done. Lactose is most common in milk, butter, yogurt, ice cream and cheese. But you may also find it in non-dairy products as an additive for texture, flavor or adhesive qualities.

This includes many processed foods—hot dogs, processed meats, potato chips, prepared meals, breads, and even some beers. The quantity of lactose varies between products and brands.

Label reading can be helpful, but terminology can vary greatly between language and regions. The quantity of tolerable lactose varies from person to person and, in most cases, the best approach is trial and error.

Lactose intolerance generally does not cause significant weight loss or blood in stools. If you have an illness that may be exacerbated by lactose intolerance, you should always seek advice from your medical provider or a gastrointestinal specialist.

