

NUTRITION AND GASTROINTESTINAL DISEASE

CLINICAL GASTROENTEROLOGY

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To my GI colleague Steve, who has trumpeted the education of gastroenterologists in nutrition, to my dietitian colleagues Carol and Pat, who have worked to make nutrition understandable for clinicians, and to my family, Becky, Taylor, Madison and Garrett, who have graciously and enthusiastically supported me through my career.

PREFACE

Nutritional support of the hospitalized patient is important in improving patient outcome. The past 40 years have shown tremendous improvement in medicine's ability to deliver nutrition to at-risk patients. The use of parenteral nutrition (PN) was introduced in the 1960s and has continued to be an important tool for the nutrition support of patients with gastrointestinal (GI) impairment. Advances in enteral access techniques and in the development of specialized enteral nutrition (EN) feeding formulas have created interest in the development of disease-specific nutrition management.

Gastroenterologists, by the nature of their expertise in gut physiology and disease, should be the experts in nutrition, knowledgeable about the effects of nutrition on disease management. Many of the diseases a gastroenterologist encounters, such as short bowel syndrome, inflammatory bowel disease, celiac disease and obesity, require expert nutrition knowledge and management to improve outcomes.

To date, many gastroenterology training programs in the United States remain deficient in their nutrition curriculum. This book serves as a hands-on, practical reference in nutrition support for the clinical gastroenterologist and for other clinicians with similar interests.

Mark H. DeLegge, MD

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