

Exclusive Enteral Nutrition (EEN)

Indications:

- active luminal Crohn's disease in patients of any age (paediatric and adults), any phenotype (inflammatory, inflammatory strictures, penetrating) and any disease location (ileal, ileocolonic, colonic)

IBD Guideline Recommendations

- Patients in whom steroids are contradicted.
- Patients who want to avoid using steroids.

Other special circumstances

- Preoperatively to reduce inflammation and improve nutritional status before elective surgery
- Patients flaring on anti-TNF and other biologic therapy

Notes:

- Discuss with patients that this treatment is effective but requires 100% adherence to the treatment to get the best outcome. Different centres may have different protocols for other allowed foods and fluids and this may vary between paediatrics and adults.
- There are a variety of nutrition formulae that can be used for EEN. In NZ the funded options are polymeric cow's milk protein based formula (ensure plus, ensure powder, fortisip, paedisure) and elemental (Vivonex, Elemental 028).
- Patients initiated on EEN should be referred to a clinical dietitian for management and support to ensure adequate nutrition intake and monitor response to treatment.

EEN may be less well tolerated in:

- Patients with current nausea (nausea may worsen in the first two weeks of EEN)
- Patients who tend towards constipation (bowel motion volume and frequency reduces with EEN)
- Patients with a history of eating disorders (may trigger eating disorder thinking and result in under nutrition/low calorie intake)
- Patients with a history of emotional eating, high levels of anxiety or depression may need extra support during treatment.

Post EEN food reintroduction

- There is limited evidence on the most appropriate post EEN treatment or food reintroduction protocols. Current clinical practice in NZ includes: LOFFLEX diet, Phase 2 Crohn's disease exclusion diet, phased reintroduction increasing texture and variety of food as tolerated, resumption of normal diet over a 5 day period.
- Suggested pathway as per Day et al 2019 paper doi: 10.1002/jgh3.12256

NZSG IBD Guidelines for Biologics

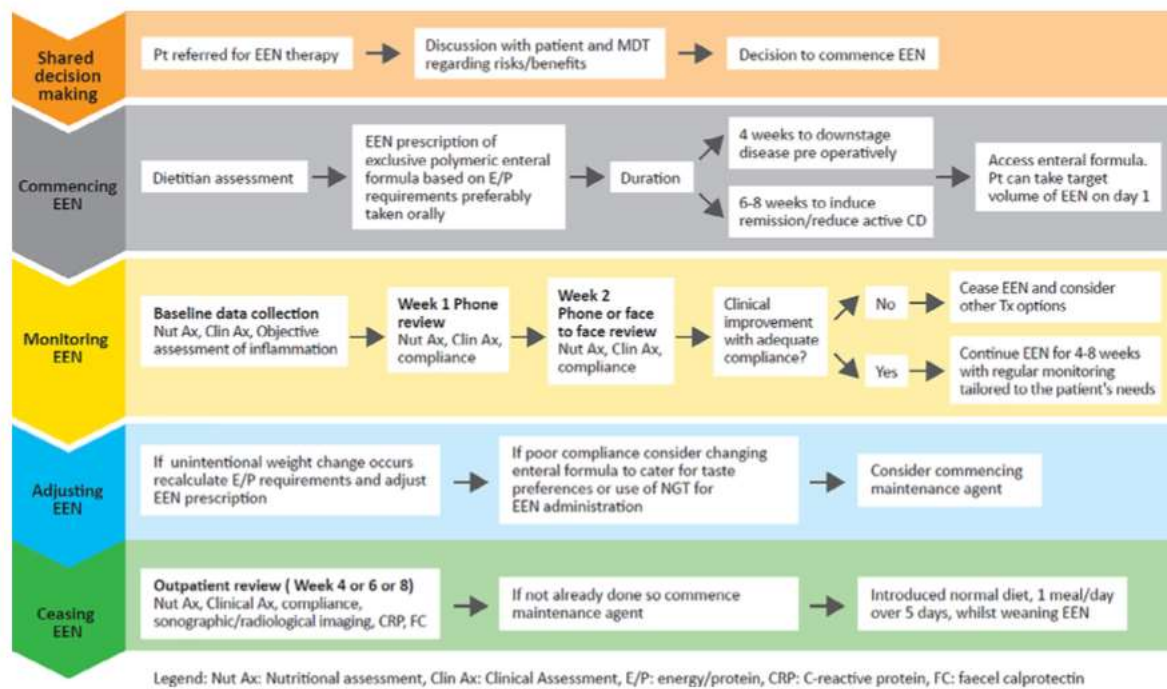


Figure 1 Optimal care pathway for using exclusive enteral nutrition in adults with active CD. CD, Crohn's disease; Clin Ax, clinical assessment; CRP, C-reactive protein; E/P, energy/protein; EEN, exclusive enteral nutrition; FC, faecal calprotectin; MDT, multidisciplinary team; NGT, nasogastric tube; Nut Ax, nutritional assessment.

[Patient information](#)

A handout developed by DECCAN (Dietitian Crohn's Colitis Australian Network) and other resources is available at <https://deccanibd.org/resources/fact-sheets/>