



Patient Information: Lactose Intolerance

This information sheet is for general information and is not to provide specific medical advice. You should discuss your medical condition with your doctor to ensure correct diagnosis, management and care.

What is lactose intolerance?

Lactose is a carbohydrate sugar found in dairy products, which is digested, in the small bowel by the enzyme lactase. People who cannot easily digest lactose are said to, have lactose intolerance or be lactase deficient. Acquired lactose intolerance occurs in most non-milk drinking populations and develops in late childhood. The prevalence of lactose intolerance is ethnically based:

Australian Caucasian	20%
Asians born in Australia	80%
Asians born in Asia	95%
Mediterranean's	41%

Secondary lactose intolerance can occur after small bowel mucosal damage following gastroenteritis and Coeliac disease.

What are the symptoms?

The most common symptoms of lactose intolerance are mild discomfort in the abdomen, a bloated feeling, wind and diarrhoea. You can't be sure you have lactose intolerance from these symptoms alone since they can be caused by other conditions. eg. Infections, Irritable Bowel Syndrome and Coeliac disease.

Tolerance of milk products is very variable in lactase deficient people; many can still consume 10-14g lactose (200 ml of milk) spread through the day.

How is lactase deficiency diagnosed?

In practice, a trial of withdrawal of milk and milk products can be instituted for 2 weeks, if problems resolve then a presumptive diagnosis can be made.

Lactase deficiency is diagnosed by a biopsy from the small bowel during endoscopy, which can measure the lactase level; this can also test for Coeliac disease.

An indirect way to test for lactase deficiency is by a lactose hydrogen breath test. A kit can be obtained from Bondi Junction Endoscopy Centre.

What changes should you make in your diet?

Lactose intolerance generally isn't serious, and can be controlled by some simple changes in your diet. Lactose free milk or Soy milk can be substituted during a trial of lactose withdrawal for 2 weeks, if symptoms improve, lactose can be added back to the diet to see how much you can tolerate. As noted above, most lactase deficient people can have (8-10gm lactose) 200 ml milk spread through a day.

<u>Diary Food</u>	<u>Lactose content</u>
Milk (full fat/skim/include milk in lattes etc) 200ml	9.4 g
Cheese (cheddar, brie, edam, swiss, fetta)	0.1 g
Cream cheese	3.2g
Ricotta $\frac{1}{2}$ cup	4g
Cottage $\frac{1}{2}$ cup	3g
Yoghurt 200g	7.8g
Ice-cream 1 cup	10g
Butter/cream 1 tablespoon	0.2 g

Why shouldn't you give up dairy foods?

Dairy foods are an important source of vitamins and minerals you need for good health. You can continue to enjoy them by making some simple changes in your diet. As you can see from the table, many dairy foods have little or no lactose, so they will not cause your symptoms. Here are some general principles to keep in mind when selecting food.

Choose full cream milk instead of low fat or skim milk. Fat slows the passage of lactose through your digestive system, giving your body more time to digest it.

Most cheeses have virtually no lactose, so you can continue to enjoy them.

In small servings of 1 tablespoon or so, butter and cream have very little lactose and can probably be enjoyed without causing symptoms.

Ask your pharmacist about lactase products that may help you enjoy dairy foods without causing symptoms

In some Australian states, long-life low lactose milks are available in supermarkets.

After your symptoms have stopped for a while, you may be able to increase your lactose without further problems. Many people find that they become more tolerant of lactose with time.

Remember to include the milk in your coffee if you have flat white or latte.

Yoghurt actually loses lactose while it sits in your fridge. Keeping it for a while before you eat it may reduce the chance that it could cause symptoms.