

## MOST COMMON SPECIAL DIETARY NEEDS

Condition	Description	Diet	Resources
<b>Gluten Intolerance or Celiac Disease</b>	Decreased ability or inability to break down gluten (a protein). Causes gut fill to flatten resulting in decreased absorption of all nutrients. Can lead to malnutrition.	NO Wheat, Rye, Oats or Barley. Products with rice or potatoes (potato bread) are usually ok. Fresh fruits and fresh vegetables are usually ok.	<a href="http://www.celiac.org">www.celiac.org</a> <a href="http://www.celiac.com">www.celiac.com</a> <a href="http://www.americanceliac.org">www.americanceliac.org</a>
<b>Chronic Kidney Disease</b>	In children, usually a genetic problem or the result of an injury. Lab values fluctuate, so diet needs may change frequently. The kidney no longer filters appropriately. There are stages of this condition. End stage kidney disease requires dialysis. Many patients receive transplants and may no longer need food restrictions.	Low Sodium, Low Potassium, Low Phosphorous. May have low protein diet and fluid restrictions.	<a href="http://www.kidney.org">www.kidney.org</a> <a href="http://www.davita.com">www.davita.com</a>
<b>Diabetes (Type 1 or Type 2)</b>	<p>Type 1 diabetes is a condition where the pancreas no longer makes insulin, which is required for the body to use carbohydrates. So they inject synthetic insulin and count carbohydrates to find a balance in blood sugar.</p> <p>Type 2 diabetes is often related to a sedentary lifestyle resulting in overweight or obesity, but can also be a genetic condition. It is treated with a wide variety of medications in pill and injection form. Most of these students will have carbohydrate limits to promote weight stability or weight loss.</p>	<p>Many type 1 students will have a normal diet but will have to count carbohydrates.</p> <p>Some type 1 and most type 2 students will have carbohydrate limits.</p>	<a href="http://www.jdrf.org">www.jdrf.org</a> <a href="http://www.diabetes.org">www.diabetes.org</a>

<b>Cystic Fibrosis</b>	In people with CF, a defective gene and its protein product cause the body to produce unusually thick, sticky mucus that: Clogs the lungs and leads to life-threatening lung infections, obstructs the pancreas and stops natural enzymes from helping the body break down food and absorb vital nutrients.	Increased calorie needs; usually have double portions or double trays. May have a nutritional supplement like scandishakes.	<a href="http://www.cff.org">www.cff.org</a>
<b>Food Allergies</b>	An immune system response to food that the body mistakenly believes is harmful. Can range from relatively mild to severe (anaphylaxis). Meets the definition of disability.	Most common food allergies: “The Big 8” include milk, egg, soy, wheat, peanuts, tree nuts, fish and shellfish. Students may be allergic to one or many items. Some students are allergic to other foods not listed here.	<a href="http://www.foodallergy.org">www.foodallergy.org</a>
<b>Food Intolerances</b>	An adverse reaction to food that does not involve the immune system. Not typically a disability.	School food service may, but is not required to, make food substitutions for them.	<a href="http://www.foodallergy.org">www.foodallergy.org</a>

### TIPS FOR SUCCESS

Most patients with these conditions are monitored at Arkansas Children’s Hospital. They have an assigned Registered Dietitian Nutritionist and prescribed diet instructions. ACH Clinical Nutrition Department (501) 364-1264

The physician-signed Special Dietary Needs Form SHOULD include instructions for modifying the diet. Always ask for a copy of the materials that the parent or guardian uses at home.

Always have a signed Special Dietary Needs Form on file for each student receiving a modified meal.

Never make changes based on your own knowledge. The modifications must be prescribed by the physician or other medical authority.

Recommendation: obtain updated forms at the beginning of each school year by working with your school’s nurse.

Communication with parents is the key to success!!!