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Corrupted diet-disease knowledge and fear of food trigger suffering in patients with a history of acute diverticulitis

An interpretative phenomenological analysis



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Introduction

The inpatient dietary management for acute diverticulitis routinely includes dietary restrictions despite a lack of evidence for this approach.

The lack of qualitative research prevents understanding the patient experience, which is a barrier to providing patient-centred care.

Findings

Participants' described experiencing a phenomenon we have called the "fear of food framework"; which sits within a context of "corrupted diet-disease knowledge" and is triggered by a "fear of food".

Purpose

To understand the impact of dietary restrictions for the management of acute diverticulitis on patient experience.

Methods

Four semi-structured in-depth face-to-face interviews were conducted with adult patients admitted to a public hospital in South East Queensland, Australia, for acute, uncomplicated diverticulitis treatment. All participants had experienced acute diverticulitis previously, with the first episode ranging from 6-months to 30-years ago.

Interviews were analyzed following the interpretative phenomenological analysis (IPA) framework.

Cycle recommences with increased fear of food

"I'm more dubious [about food] now... I'm going to work harder"



TAKEAWAY OPEN

A multidisciplinary collaborative approach is needed to avoid unnecessary dietary restrictions and negative food associations to prevent avoidable psychological pain by patients. Increased research is needed regarding the dietary management of diverticular disease to improve quality of life and establish a consistent dietary management approach.