

A healthy and balanced diet is important for everyone. This information sheet looks at difficulties some people with autism might have with food and diet and how to support people with autism to have a healthy diet and lifestyle.

Introduction

What we eat has a big impact on the way our body works and how we feel. A poor diet can make us feel more tired, stressed or anxious, and can cause a number of health problems. It is important to have as healthy a diet as possible. However, some people with autism may have trouble eating certain foods that the human body needs to be healthy. Having a thorough understanding of diet, things to look out for and goals to aim for can help us to support people with autism to enjoy a healthy lifestyle.

A healthy diet

A healthy diet for a person with autism is exactly the same as a healthy diet for anyone else. The ideal diet contains:

- 5 portions of fruit and vegetables per day
- Starchy foods – preferably wholemeal
- Protein twice a day
- 3 portions of dairy per day

However, it is important to remember that a healthy diet may be extremely difficult for a person with autism to achieve. The aim should always be to give that person a diet that is as close to this ideal as possible, without causing them any distress. If you can only get the person to eat one or two portions of fruit and vegetables per week, this is a step in the right direction and may be the best you can do. It is still preferable to a diet with no fruit or vegetables at all.

Some people will not eat even this small amount of fruit and vegetables and to try to make them do this would cause them great distress. In this case you should speak to your GP or dietitian about dietary supplements.

Areas of concern

The following areas could be affected by poor diet:

- Weight loss/gain
- Eating less than 20 foods
- Constipation or diarrhoea
- Refusing to eat any of the 4 major food groups (carbohydrates, protein, dairy, fruit and vegetables)
- Medical issues, for example diabetes or high cholesterol
- Distress due to pain or discomfort
- Tooth decay

If you are concerned about any of these issues, or if they persist, visit your GP.

What might you see if a person has difficulties with food?

Bowel problems

It is estimated that up to 70% of the autistic population may also experience bowel problems. Bowel problems can be made worse in autism if the person is unable to communicate their needs, if they experience anxiety or if their eating patterns make the problem worse.

Common symptoms of bowel complaints include diarrhoea, reflux, constipation and wind, all of which may cause pain and discomfort.

- **Diarrhoea** can cause stomach cramps and pains as well as loose stools. It can be caused by stress, food intolerances, allergies, amongst other things. It is vital that the person is kept fully hydrated with plenty of fluids, as diarrhoea can make them very dehydrated and this can make them seriously ill.
- **Reflux** is when stomach acid enters the throat, which can be very painful and cause bloating and belching. It is usually caused by over-eating or eating food shortly before exercise or sleep.
- **Constipation** and **wind** can be caused by stress, medications, anxiety, a change in routine, some food intolerances and allergies, and in some cases ignoring the urge to pass stool. Some people with autism may resist the urge to pass stool because they have a fear of the toilet, a sensory need that they are trying to fulfil or a sensory input from going to the toilet that they are trying to avoid.

If the person with autism is unable to communicate their discomfort they may show behaviours of concern, like agitation and aggression. The issues can also increase anxiety, which can in turn make the person's health worse.

Eating disorders

Between 3 and 4% of people with autism have an eating disorder. Furthermore, between 15 and 20% of patients treated for an eating disorder go on to be diagnosed with autism. Eating disorders can affect women and girls, as well as men and boys. The strict routine and consistency associated with eating disorders echoes the rigidity of thought and resistance to change seen in people with autism. Sensory issues or a fear of going to the toilet may also encourage a person to avoid food, and this can quickly become a habit.

If you are concerned about somebody's eating habits then you should take them to see a GP immediately. They will be able to offer you advice and support as well as being the best way to gain a referral to psychological and emotional support.

Pica

Pica is when people eat things that are not food. It can happen if a person has a compulsion to satisfy a sensory need. It can also be caused by a person not knowing the difference between edible and inedible items. Stress and anxiety can also cause pica or, if the person already has pica, can make it worse. Pica can cause bowel and gut problems. It can also be extremely dangerous if the person eats something toxic or damaging to their insides. A person with pica may also feel too full to eat actual food.

If a person has pica due to sensory needs, you may be able to help by replacing the sensory input with something similar but safer. For example, some people may eat faeces. This may be for the texture or the strong taste or smell. Try giving the person something to eat that will fulfil each of these needs and see if this stops the behaviour. Some people may find that they get a lot of attention or some input from other people when they eat inappropriate things. You should remain calm and encourage them to seek out the attention in a more positive way. Reducing your use of language and backing up your requests with visual supports can help a person feel less overwhelmed and process information more easily.

Intolerances and allergies

People with autism can be affected by the same allergies or intolerances as the neurotypical population. If this affects what they can eat, you should ensure that their diet is balanced to replace any nutrients they may be missing. If you are not sure of how to do this you can consult a dietitian. You should also see a GP before making big changes to any diet.

Obsessive Compulsive Disorder

Between 8% and 24% of people with autism have Obsessive Compulsive Disorder (OCD), compared to just 1.2% of the total UK population. OCD is a condition that means a person becomes fixated on repetitive and stereotyped behaviours. This has a strong link to the behaviours seen in autism and is considered a separate diagnosis when the behaviour becomes unwanted and distressing – as opposed to “stimming” which is usually pleasurable and can be used to reduce anxiety or stress.

OCD can affect a person’s diet because they may become obsessed with whether or not their food is contaminated. They may also need to eat in a particular way to fulfil a ritual and they may refuse to eat at all if any part of this is disrupted.

If you are concerned about somebody that you think may have OCD, you should take him or her to a doctor. This is the best way to get help for them and a referral for psychological or emotional support.

The experience of eating

There are many different processes going on while we eat. We are using all of our senses to process the food in front of us, and our organs and muscles are all working together to digest each mouthful. We are also using our intellectual abilities to make sense of our environment and our situation as well as to understand what the food is in front of us: whether we have had it before; whether we enjoyed our last experience of it; whether it is good for us, and many other considerations.

This is already a potentially overwhelming experience for a person with autism and may be made worse if they have particular preferences that are not being met. For example, some people will have a preferred way of presenting their food, perhaps on a particular plate or with a particular set of cutlery. Other people will have a specific way of organising their food and may not like different foods to touch. While a person may understand what baked beans are and what chips are, they may not recognise them if they are touching, or mixed together. Some people may struggle to generalise their understanding of each food item in other ways as well, for example when does an apple become an apple core – and therefore rubbish? Or, if the person has only ever seen green apples then they may not know what a red apple is. This may make it difficult for them to eat certain foods.

Sometimes the person's rituals associated with meal times have not been observed and so they no longer know what to expect from their food. If things have changed from what they are used to then a person with autism may become anxious.

When presenting food you should consider all of these possibilities and ensure that the environment is set appropriately for that individual. If they are struggling to eat then you should make alterations wherever possible until you find a solution that works for that person. It is also important to remember that a person's anxiety level will have a huge impact on their ability to compromise on any of these aspects.

Therapeutic diets

There are several diets that claim that they offer some therapeutic benefit to people with autism. These are often not evidence-based and so you should take great care before considering them. These diets are hard work to keep up, particularly in an already stressful environment, and they exclude important parts of a healthy diet. If you want to try one of these diets you should see a GP or dietitian first.

The gluten free and casein free diet (GFCF) is probably the most commonly used alternative diet for people with autism. Many people claim to have seen significant changes in behaviour when using this diet for a person with autism. Gluten is found in wheat, barley and rye and casein is a protein found in milk and dairy products. This means that it is extremely difficult to eliminate these things from your diet completely. This difficulty makes it hard to run controlled medical trials to establish the benefit of the diet. The research that has been done has shown no evidence to suggest that this diet will have any effect on the core features of autism.

Top Tips

- Treat medical symptoms first: if a person is suffering from diarrhoea, constipation or mineral deficiencies then they may feel quite unwell and have difficulties with eating. Consult your GP about treating these as separate medical conditions first.
- Rule out other problems: think about all of the things that may be causing problems around food. Is it a behavioural issue? Is it a particular person serving the food and not the food itself? Does the person get a particular reaction when they refuse food or over-eat?
- Trial and error: change each detail until you see an improvement, test different ideas. Is the sensory environment too stimulating? Is the person anxious around mealtimes? Could you try presenting the food in a different way or try different types of food?
- Schedule: try changing your schedule around food. Create more of a build up to meal time with prompts and explanations to encourage the person to be prepared to eat. Also try to stick to a specific schedule to reduce anxiety.
- Visit a dietitian: if you want to make changes to the person's diet or you aren't sure how to provide the best balance for them, visit a dietitian. Dietitians have specific medical training and are registered with a governing body so make sure the person you see is a registered dietitian. Some also specialise in autism and learning disabilities and may be able to offer more tailored support.

Why might someone with autism have difficulties with food?

The following table summarise how some of the features of autism may contribute to some difficulties with food.

Difficulty with food	Possible reasons
Over-eating	<ul style="list-style-type: none"> • Sensory: may enjoy textures, tastes, smells etc. • Anxiety: may eat for comfort or routine • Not knowing when to stop or not wanting to stop
Under-eating	<ul style="list-style-type: none"> • Anxiety: may feel too uncomfortable to eat • Intolerances and allergies: may have limited diet • Routine: if this is disrupted they may not be able to eat • Fussy eating: a limited diet may make it hard to eat well
Fussy eating	<ul style="list-style-type: none"> • Sensory: may dislike certain textures, tastes, smells etc. • Anxiety: may find eating stressful or associate foods with stressful memories • Presentation: may need food presented in a certain way to be able to eat • Routine: if this is disrupted they may not be able to eat • Rigid thinking: may not recognise food or may be upset by foods mixing because they do not recognise the mix as food • Contamination: may fear or dislike contamination from germs, smells or tastes
Pica – a disorder where a person eats non-food substances, for example dirt, metal and grass	<ul style="list-style-type: none"> • Sensory: they may be seeking some sensory input - you may be able to work out what they need by analysing what they choose to eat • Misunderstanding: they may not know what is food and what is not food • Attention: if you react to this behaviour in a predictable way, they may like the sense of routine or the response itself.
Eating disorders	<ul style="list-style-type: none"> • Sensory: may dislike certain foods or eating in general • Control: may enjoy the control they have by not eating or by regulating their intake • Routine: they may create a negative routine to reduce anxiety
Obsessive Compulsive Disorder (OCD)	<ul style="list-style-type: none"> • Routine: repetitive behaviours to reduce anxiety may become compulsive • Control: controlling their environment may help them to feel less anxious • Presentation: they may need food presented in a particular way to be able to eat • Contamination: they may fear contamination from germs and other things, to such an extent that they cannot eat

What might you see if a person has a poor diet?

The table below highlights some key symptoms to look out for which may indicate that a person has a poor diet. These are particularly important to look out for in people with autism who have difficulty with communication.

Results of a poor diet	Symptoms
<p>Nutrient deficiencies: people who do not eat enough or do not eat a wide enough range of food may not get enough of certain nutrients.</p>	<p>Depending on which nutrients are missing:</p> <ul style="list-style-type: none"> • More likely to get infections • Skin rashes • Headaches • Eye problems • Pains • Muscle weakness • Bowel problems • Tiredness
<p>Bowel issues: a poor diet can lead to issues like severe constipation or diarrhoea.</p>	<ul style="list-style-type: none"> • Fear of toilet • Smearing • Irritability • Agitation • Aggression • Pica • Unusual posturing • Sensitivity • Constant eating or under-eating • Touching/holding stomach or chest
<p>Problems associated with weight</p>	<ul style="list-style-type: none"> • Weight loss or weight gain • Pain • Discomfort • Inability to exercise
<p>Dental problems: this may be caused by the diet, for example if a person's diet is high in sugar, this may result in tooth decay. It could also be caused by pica, which could damage the teeth.</p>	<ul style="list-style-type: none"> • Blackened or damaged teeth • Pain • Irritability • Agitation • Aggression • Sensitivity • Under-eating • Touching/holding face
<p>Acid reflux happens when stomach acid flows back up into the food pipe. It can be caused by over-eating and eating certain types of food.</p>	<ul style="list-style-type: none"> • Vomiting • Regurgitating • Difficulty swallowing • Pain • Discomfort • Heartburn • Touching/holding chest