Build Your Resilient Gut
MICROBIOME & BEYOND

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Common GI Problems & Solutions: Gastroparesis

Gastroparesis, looking at that, again, is delayed stomach emptying due to weakened stomach muscles. That can cause nausea, vomiting, overly full eating. Again, a good way of estimating if you're dealing with this is you eat, you feel your stomach is full and satiated, and after you eat, hopefully within 35, 40 minutes, and then if your stomach continues to feel full beyond the three-hour mark since when you ate, you might have an issue with slowed gastric emptying, which is what gastroparesis is. And again, this thing can be tested and most doctors can do this to test what your stomach emptying or gastroparesis risks are. And I would encourage you to do that if you find that even three hours after a meal, you're still feeling very full, and bloated, and have a lot of distension in the belly.

Consequences are very similar to lots of other things we talked about. Gastric fermentation, so you can get bacterial overgrowth in the stomach itself, and that can then translate into bacterial overgrowth in the small intestine, and can contribute to SIBO. Of course, poor and compromised digestion, nutrient absorption, and contributing to malnutrition, vitamin and mineral deficiencies are all within scope here as well. And then poorly digested food particles can trigger all these immune responses down the road, not only in the stomach, but in the small intestine, and even the large intestine if those food particles make it that far. So lots of inflammatory responses, not just in the local area in the stomach, but in areas beyond the stomach as well. So this

can be very impactful as a result of gastroparesis.

Root causes, part of it is somewhat of a nerve damage or paralysis of the nerves in the stomach, the neurons that control stomach movement. And that is often attributed to diabetes. In diabetes, you can get neurons and micro vessels and all that that die and become inactivated because of improper circulation. This is one of the things that can occur, is gastroparesis. Hypothyroidism, autoimmune conditions, medications like opioids, and vagus nerve dysfunction. And notice a lot of these things are inflammatory driving, like hypothyroidism, autoimmune disease, medications like opioids. And so inflammation and the resulting damage can be one of the drivers of gastroparesis. So something to keep in mind there.

And then solutions for this from a lifestyle perspective is very similar to hiatal hernia, where you would want to eat smaller and more frequent meals. Again, try to space those clusters of meals six hours or so apart from the next cluster of meals. Remain upright again after eating. Try to stimulate the vagus nerve for improved motility. Some of the simple things to stimulate the vagus nerve is humming, singing. There are vagus nerve stimulators that you can buy. So if you just google "vagus nerve stimulator", you'll be able to find these devices that you can just put for 10, 15 minutes on the vagus nerve on the neck, after a meal or before a meal, to really stimulate the vagus nerves. And they do work well. So if this is a significant problem for you, you may think about doing that as well.

Improved food hygiene of course, and then movement after eating is really important. Generally, movement after eating is really good for you. 20 minutes of walking, even if it's at a low pace, after a meal can be hugely beneficial, not only for the digestion process, but for the metabolic system as well. It dramatically lowers postprandial insulin response and sugar response. So there are studies that have come out looking at the number of steps per day and so on, 7,500 steps at a minimum for significant benefit, and then 10,000 plus to really gain benefit. But then there are studies that have also come out that shows that if you walk or you have movement for 15 to 20 minutes after a meal, it dramatically improves your outcome for longevity, overall health, gastric

health, nutrition, assimilation, and so on, because that movement is going to be critical to allow all of these digestive processes to function properly, right?

... these digestive processes to function properly, right? So for all of the conditions that we talked about so far, walking after the meal can be hugely beneficial. I think I mentioned this in an earlier module where even if there's not an opportunity to go out and walk after you eat a meal, say I'm home and I can't leave the house for some reason, I just walk up and down the stairs or I just walk in place. I have a treadmill downstairs, so I might go down and just walk uphill on the treadmill for 15 or 20 minutes right after I have a meal. If I'm in a hotel, I will go down to the gym and walk on the treadmill there. I just did that on my last trip. Every meal that I ate at the hotel, but with the exception of dinner, during the day, I would go to the gym and walk in the treadmill for 15 to 20 minutes.

I've been known to jog in place and dance around a little bit in my hotel room after a meal if I'm eating in the room on a work trip. In the evening, I like going out. If I'm on a work trip, for example, business thing, conferences like I just was in Vegas, I like trying to either walk back to where I'm going after the meal. And if that's too far, getting back to where I'm going and then walking around, just taking a stroll around the hotel, even if it's a hotel with the lobby, just walking around the hotel in the lobby, taking the stairs up to your room. However you can engage in some motion will be hugely beneficial to be able to do that. And that's just good for all of these digestive processes itself, but especially important for gastroparesis and reflux. People with hiatal hernias, that can be a huge impact as well. So something to think about.

Now, from a diet perspective, focus on easily digestible food. So you might want to go lower fiber, lower fat in this case as well if you have severe gastroparesis or go to a fiber that's lower viscosity, that's a soluble fiber with lower viscosity. You can Google that and I'll give you examples of what those fibers are. Some people with really bad gastroparesis may have to go to a liquid meal. That's what they might have to do for a period of time. That's something you would work out with your doctor whether or not that's the right move. But some people have to blend and go to a semi-liquid meal.

Consuming ginger can stimulate mortality. Ginger's fantastic. There's a couple of restaurants I go to that's near me that they have this awesome ginger, cucumber, mint, lime drink that I often will get prior to my meal as an aperitif drink, because the ginger, the lime, all of that stuff helps with getting the secretions going. And then with food coming in, it helps stimulate the movement of the bowels as well. And then ginger, of course, also reduces inflammation quite a bit. So that can be really beneficial to stimulate mortality. You can make that at home yourself, right? Just make sure you have ginger at home. You buy one of those little pieces of ginger, you can cut slices of it and just keep it in the fridge and then you could throw a slice or two in a glass of water and allow some of the gingerols to get extracted out of that and either drink the water or even just eat the piece of ginger if you're okay with that. So that can be beneficial.

As I mentioned, low viscosity, soluble fiber can help, things like hydrolyzed guar gum. So that if you have to go on a low fiber diet to manage your gastroparesis, you want to start adding back fiber, you would want to go with a low viscosity fiber like a hydrolyzed guar gum to get the fiber into your system. From a supplement perspective, **MegaGuard**, again, can be very helpful here with gastroparesis. There is a artichoke extract that's in MegaGuard that has good clinical trials showing improved gastric emptying and movement of the gastric system where the stomach then effectively empties into the small bowel. **Holozyme**, because of a broad spectrum enzyme, a lot of times when people have gastroparesis, the food just sits in the stomach too long and it's not getting digested properly and can ferment. So Holozyme with its spectrum of digestive enzymes can go in and start breaking down the food and help reduce some of the fermentation that may occur in the stomach as the stomach is trying to clear the food from the system into the intestine.

The enzymes I would highly, highly recommend. Generally, people should be taking digestive enzymes anyway, especially with a heavier meal that you might consume, because after the age of 30, your pancreas is going to start reducing the amount of digestive enzymes that it produces. So having some

form of supplemental enzyme can be really useful. Keep in mind that our ancestors ate whole foods, often raw. Many of those raw whole foods actually have enzymes in them, active enzymes that function as part of the digestive process. But we don't eat raw whole foods very much, nor is our agricultural foods as complete in terms of functionality and nutrition as they used to be through the course of evolution. And so, even if we ate raw food now, we may not still get the same enzymatic benefit. So without that natural source of enzymes, it does make sense to supplement with digestive enzymes with each meal. I do that with each meal. I've done it for a long time. I actually started my work in the health and nutrition space in the enzyme world. So I came from enzymes and then went into the microbiome. I regard enzymes very highly.

Prokinetic herbs can help. Things like ginger, as I mentioned, and magnesium can also support motility for people with gastroparesis.