

Effect of dietary modification on clinical severity of functional abdominal pain among children.

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List of Abbreviations

Abb.

Full term

FAP: functional abdominal pain

FGIDs : functional gastrointestinal disorders

IBS: irritable bowel syndrome

N : number

IBS(C-type): irritable bowel syndrome with constipation.

IBS(D-type) : irritable bowel syndrome with diarrhea.

IBS(M-type) : irritable bowel syndrome mixed type.

Introduction

Functional abdominal pain (FAP) without a clear organic cause is a common complaint in childhood and adolescence (**Chitkara et al., 2005**).

Functional abdominal pain disorders (FAPDs), also called pain-predominant functional gastrointestinal disorders (FGIDs), are the most common cause of chronic abdominal pain in children and adolescents (**Boyle and Hamel, 2001**).

In fact, almost a quarter of all children seen for stomach or intestinal complaints have functional abdominal pain, functional abdominal pain includes several different types of chronic abdominal pain, including recurrent abdominal pain, functional abdominal pain non otherwise specific, and irritable bowel syndrome (**Seema et al., 2012**).

Sometimes it is associated with changes in stool, for which a diagnosis of irritable bowel syndrome (IBS) would be appropriate (**Youssef et al., 2001**).

Functional abdominal pain and irritable bowel syndrome are associated with school absences, reduced quality of life, and increased psychological distress (**Sztainberg et al., 2009**).

The idea that certain foods trigger their symptoms In addition, the gastrointestinal (GI) symptoms associated with FAP and IBS are also typical for food allergies and intolerances. These symptoms include nausea, abdominal pain, abdominal cramping, bloating, and diarrhea. When combined, these factors lead to the suspicion of food allergies/intolerances and the most likely culprits have been milk and gluten, traditionally, clinical experience indicates that families of children with FAP/IBS