

Food Intolerance

A practical, compassionate guide to noticing patterns, knowing when to seek help, and making food changes safely.

You are not imagining how you feel

Repeated bloating, bowel changes, headaches, tiredness or discomfort after food can be exhausting. Symptoms deserve to be taken seriously — while also remembering that many different conditions can cause the same symptoms.

What is a food intolerance?

Food intolerance is an adverse reaction to a food or ingredient that does not usually involve the same immediate immune mechanism as a food allergy. Symptoms often appear a few hours after eating and may last for hours or sometimes days. Lactose intolerance is a well-established example, but reactions can also be linked with substances such as caffeine, alcohol, sulphites or other dietary components.

The important word is **pattern**. One uncomfortable meal does not prove an intolerance. A repeated relationship between a food, the amount eaten, timing and symptoms is much more useful information.

Common signs to notice

Digestive	Whole-body	Skin / comfort
Bloating Excess wind Abdominal pain or cramps Diarrhoea Constipation Nausea	Headache Tiredness or exhaustion Feeling generally unwell Occasional joint discomfort	Rashes can occur in some people A sense that certain meals repeatedly leave you uncomfortable

Food allergy is different

Swelling of the lips, mouth, tongue or throat; wheezing or breathing difficulty; collapse, severe dizziness or rapidly worsening symptoms may indicate a serious allergic reaction. Call 999 in an emergency. Do not use an intolerance guide to self-manage possible anaphylaxis.

How to recognise a meaningful pattern

Food-related symptoms can be confusing because the reaction may be delayed, the same meal contains many ingredients, and stress, illness, medication, sleep and hormones can also affect digestion. Instead of trying to identify a culprit from memory, gather information gently and systematically.

1. Notice the timing

Write down when you ate, when symptoms began, how long they lasted and how intense they were. Intolerance symptoms commonly develop a few hours after the trigger, rather than necessarily during the meal.

2. Look for repetition

Ask: does this happen most times I eat this food? Is it worse with a larger portion? Do symptoms settle when I have less of it? Repeated observations are more useful than a single episode.

3. Record ingredients, not just meals

A bowl of pasta, for example, may include wheat, milk, cheese, onion, garlic, sauces, additives and other ingredients. A detailed record can help a GP or dietitian see patterns that are difficult to spot alone.

4. Track symptoms without becoming consumed by them

A diary should create clarity, not fear. A simple 0–10 symptom score is enough. If tracking is increasing anxiety, food restriction or obsessive checking, stop and seek professional support.

A simple 14-day food & symptom record

Date / time	Food & amount	Symptoms & onset	0–10	Other factors
				sleep, stress, illness, medication

Do not remove lots of foods at once

Broad restriction can make it harder to identify the true trigger and can reduce nutritional variety. This is especially important for children, people with restrictive eating, eating disorders, ARFID, low weight, pregnancy or significant medical conditions.

What else could it be?

Symptoms such as bloating, pain, diarrhoea, constipation and fatigue are not specific to food intolerance. A good assessment considers other explanations rather than assuming food is always the cause.

- **Lactose intolerance** — reduced lactase enzyme can cause bloating, wind, cramps and diarrhoea after lactose-containing foods.
- **Coeliac disease** — an autoimmune condition triggered by gluten. Do not start a gluten-free diet before appropriate testing because this can affect test results.
- **IBS and fermentable carbohydrates** — some people react to particular FODMAP carbohydrates; a structured approach is best supervised by a dietitian.
- **Food allergy** — immune-mediated reactions can overlap with digestive symptoms but may also involve hives, swelling, wheeze or breathing problems.
- **Other digestive or medical conditions** — persistent or changing symptoms deserve medical review rather than repeated self-restriction.

When to speak to your GP

Arrange a GP appointment if symptoms keep returning, are affecting daily life, or you are unsure what is causing them. Seek prompt medical advice for unexplained weight loss, blood in the stool, persistent vomiting, significant dehydration, severe or worsening pain, difficulty swallowing, persistent fever, or symptoms that wake you regularly at night.

Before a GP or dietitian appointment

Take your food-and-symptom diary, a list of medicines/supplements, family history of digestive or allergic conditions, and a note of any foods you have already removed. Explain what you want help with: identifying the cause, ruling out medical conditions, and keeping your diet nutritionally safe.

Elimination and reintroduction

A professionally guided elimination-and-reintroduction approach may be used when an intolerance is suspected: a specific food is reduced or removed for a limited period, symptoms are observed, and the food is then reintroduced in a planned way to see whether symptoms return. The reintroduction step matters — improvement during restriction alone does not prove the food was responsible.

About food intolerance testing

There is understandable appeal in having a test that promises a clear list of foods. However, NHS guidance states that some home tests claiming to diagnose food intolerance are not recommended because evidence for accuracy is limited and they may lead people to avoid multiple foods unnecessarily. The British Dietetic Association also advises careful, evidence-based assessment.

YorkTest — optional additional information

YorkTest currently offers commercial home-to-laboratory food reactivity testing using food-specific IgG measurements and provides nutritional support with some packages. If you choose to explore YorkTest, treat the result as **additional information rather than a stand-alone medical diagnosis**, and discuss significant dietary changes with an appropriately qualified clinician or dietitian.

Space to Breathe Therapy YorkTest code

PLEAROYD

If you choose to purchase through YorkTest, you can enter this code when ordering. Availability and any associated offer can change, so check YorkTest's current terms at the time of purchase.

A compassionate personal perspective

The following is a **composite first-person reflection**, created from common experiences people describe when trying to understand persistent food-related symptoms. It is not presented as a verified customer testimonial.

"I had reached the point where I was fed up with feeling uncomfortable and tired without understanding why. I kept telling myself it was probably stress, or that I just had a sensitive stomach. Eventually I decided I needed to stop guessing and start looking properly at what was happening. Keeping a diary, speaking to a professional and looking at possible intolerances changed the way I approached food. The biggest change was not finding a 'perfect diet' — it was finally having a plan. I learned which things genuinely seemed to affect me, which foods I had been avoiding unnecessarily, and how to eat with more confidence. For me, making the decision to investigate it carefully was life-changing because I felt I had some understanding again." — Anna (composite reflection)

The aim is not to make your diet smaller

When food makes you feel unwell it is easy to become frightened of eating. The long-term goal should be the widest, most varied diet you can comfortably and safely manage — not an ever-growing list of forbidden foods. Good support helps you distinguish between genuine patterns, coincidence, anxiety-driven avoidance and symptoms that need medical investigation.

Practical next steps

- **Start with observation:** keep a simple food-and-symptom diary for around two weeks.
- **Look for repeatable patterns:** note timing, portion size, ingredients and symptom intensity.
- **Speak to your GP:** especially when symptoms recur, are severe, or are changing.
- **Ask about dietetic support:** a dietitian can help investigate triggers while protecting nutrition.
- **Do not self-diagnose coeliac disease:** remain on gluten until testing is discussed with a clinician.
- **Make one structured change at a time:** this makes cause and effect easier to understand.
- **Reintroduce when appropriate:** avoiding a food forever without confirmation may be unnecessary.
- **Protect your relationship with food:** if investigation is increasing fear, restriction or distress, tell your clinician.

Books & useful reading

The Complete Low-FODMAP Diet — Sue Shepherd & Peter Gibson. A practical explanation of the low-FODMAP approach, most relevant when IBS/FODMAP sensitivity is being explored with professional guidance.

What Every Parent Needs to Know About Food Allergies — Mimi Tang & Katie Allen. Allergy-focused rather than intolerance-focused, but useful for understanding the important distinction between allergy, intolerance and safe food management.

The Bloating Belly Whisperer — Tamara Duker Freuman. A dietitian-led look at different reasons for bloating and why identifying the underlying pattern matters.

Reliable online information

NHS: Food intolerance and food allergy guidance — useful for symptoms, when to seek medical help and the role of elimination/reintroduction.

British Dietetic Association: Food allergy/intolerance information and evidence-based guidance on testing.

YorkTest: Commercial testing information and current product details. Code: **PLEAROYD**.

A supportive message from Space to Breathe Therapy

You do not have to keep putting up with feeling unwell, and you do not have to work everything out in one day. Start with curiosity rather than restriction. Notice your patterns, write them down, ask for appropriate medical and dietetic support, and make changes carefully. Understanding your body can take time — but every useful piece of information can help you move towards eating with greater comfort, confidence and choice.

Important: This guide is educational and does not diagnose food intolerance, food allergy, coeliac disease or any other condition. Severe allergic symptoms require emergency care. Persistent symptoms should be discussed with a GP or qualified healthcare professional.

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