

Food Diary & Symptom Tracking

A simple guide for real life — notice patterns, prepare for appointments and make informed changes without becoming consumed by tracking.

A diary is a tool, not a test

NHS guidance says you may be asked to keep a food-and-symptom diary to help work out possible triggers. A diary cannot diagnose an intolerance on its own, but it can turn vague memories into useful information for you, your GP or dietitian.

What to record

- Time of meals, snacks and drinks
- Foods and ingredients — including sauces, dressings and mixed dishes
- Approximate portion size rather than exact weighing
- Symptoms: bloating, wind, pain, nausea, bowel changes, headache, tiredness or other recurring experiences
- When the symptom began and how long it lasted
- Intensity from 0–10
- Bowel pattern where relevant
- Sleep, stress, illness, medication and other factors that may affect symptoms

Why timing matters

Intolerance-type symptoms may not appear immediately. Recording the time you ate and the time symptoms began can help reveal delayed or dose-related patterns. It also prevents the most recent food from automatically being blamed for a symptom that may have another explanation.

Keep it simple enough to continue

You do not need calorie counts, perfect measurements or photographs of every meal. For many people, 10–14 days of consistent, simple notes is more useful than a highly detailed diary that becomes impossible to maintain.

Protect your relationship with food

If tracking makes you frightened to eat, encourages you to skip meals, increases checking or leads to an expanding list of 'unsafe' foods, stop and seek support. Extra care is needed for children and for anyone with ARFID, an eating disorder, low weight or nutritional vulnerability.

A practical daily template

Time	Food / drink + amount	Symptoms + onset	0–10	Other factors

At the end of each day

- What symptom affected me most today?
- Was there a repeated ingredient before that symptom?
- Did portion size seem relevant?
- Were stress, sleep, illness or medication different today?
- Did I eat the suspected food without symptoms at another time?

Turning notes into useful patterns

After several days, look across the diary rather than analysing each meal in isolation. A useful pattern is repeatable: the same food or ingredient is followed by a similar symptom more than once, the timing makes sense, and the relationship may change with portion size.

Patterns worth discussing

- Symptoms occurring repeatedly after lactose-containing foods
- Symptoms linked to a particular ingredient across different meals
- A consistent dose effect — for example, a small amount is tolerated but a larger portion is not
- Symptoms that occur even when the suspected food has not been eaten
- A change in bowel habit that is persistent rather than meal-specific
- A pattern accompanied by weight loss, bleeding, vomiting or severe pain

What happens next?

The NHS describes a supervised approach in which a suspected food may be avoided for a few weeks and then reintroduced to see whether symptoms return. A breath test may be used when lactose intolerance is suspected. The key point is that elimination should be targeted and followed by reintroduction where appropriate — improvement during restriction alone does not prove a food caused the symptoms.

Do not start with a huge exclusion list

Cutting out several foods at once makes it difficult to know which change mattered and can reduce vitamins, minerals, fibre, protein or energy intake. A GP or registered dietitian can help decide whether an elimination trial is appropriate.

Preparing for a GP or dietitian appointment

- Bring 10–14 days of diary entries if possible.
- Circle the 2–3 patterns that concern you most.
- List any foods you have already removed and for how long.
- Take a current medication and supplement list.
- Mention family history of coeliac disease, allergy or digestive conditions.
- Explain whether symptoms are affecting eating, work, sleep, socialising or emotional wellbeing.
- Ask what needs to be ruled out before further dietary restriction.

Seek medical help sooner when needed

Unexplained weight loss, blood in the stool, persistent vomiting, severe or worsening abdominal pain, dehydration, difficulty swallowing or significant persistent bowel changes require medical assessment. Sudden swelling, breathing difficulty, collapse or rapidly worsening allergic symptoms require emergency help.

About commercial food-intolerance testing

NHS guidance warns that some home tests claiming to diagnose food intolerance are not recommended because evidence for accurate diagnosis is limited and they may lead to unnecessary food avoidance. The British Dietetic Association's August 2026 guidance similarly advises that food-specific IgG testing is not a reliable diagnostic test for food intolerance.

YorkTest — optional information

YorkTest offers food-specific IgG testing and nutritional support. YorkTest states that its tests do not diagnose food allergy, coeliac disease, lactose intolerance or histamine sensitivity and that food-specific IgG results cannot diagnose, treat or cure a specific food intolerance. A diary remains useful because symptoms and real-life patterns still need to be considered.

YorkTest code

If you independently choose to explore YorkTest, the Space to Breathe Therapy code is **PLEAROYD**. Check current terms at the time of purchase. Commercial testing should not replace appropriate medical or dietetic assessment.

A personal perspective

The following is a composite reflection created from commonly described experiences. It is not a claimed customer testimonial.

*"I was convinced I reacted to almost everything because I could never remember exactly what I had eaten before I felt unwell. I had reached the point where I was exhausted by guessing. Starting a simple diary changed things. I stopped trying to make every meal perfect and just wrote down what happened. After a couple of weeks there were patterns I could actually take to an appointment. For me, that was life-changing — not because the diary gave me an instant diagnosis, but because I finally felt I had useful information instead of fear." — **Claire** (composite reflection)*

Books & further reading

The Bloated Belly Whisperer — Tamara Duker Freuman. Helpful for understanding why similar digestive symptoms can have different causes.

Take Control of Your IBS — Kirsten Jackson. Practical dietitian-led guidance for understanding digestive symptoms and dietary patterns.

The Complete Low-FODMAP Diet — Sue Shepherd & Peter Gibson. Useful where IBS/FODMAP sensitivity is being explored with appropriate guidance.

A supportive message

From Space to Breathe Therapy

Tracking is not about proving that your body is difficult or creating rules around every meal. It is simply a way of listening more clearly. Keep it gentle, keep it realistic and look for repeated patterns rather than perfection. The right information can help you ask better questions, make safer changes and move towards more confidence around food.

Clinical note

This resource is educational and not diagnostic. A diary can support clinical assessment but cannot confirm food intolerance, allergy, coeliac disease or another gastrointestinal condition. Significant or prolonged food restriction should be discussed with a GP or registered dietitian.