Anti-Inflammatory Diet

Understanding inflammation, dietary patterns, realistic evidence and nourishing everyday choices

There is no single medically defined 'anti-inflammatory diet'. The term usually describes an overall eating pattern rich in vegetables, fruit, wholegrains, pulses, nuts, seeds, unsaturated fats and fish where eaten, while limiting frequent highly processed foods, excess saturated fat and free sugars. It is best understood as a pattern rather than a list of miracle foods.

What is inflammation?

Inflammation is part of the immune system's normal response to infection or injury. Short-term inflammation helps healing. Chronic low-grade inflammation is different and is associated with several long-term conditions, but it is influenced by many factors including health conditions, smoking, sleep, activity, body composition, stress and diet.

Foods commonly emphasised

Group	Examples
Vegetables and fruit	Leafy greens, berries, peppers, tomatoes, cruciferous vegetables and varied produce.
Wholegrains/pulses	Oats, wholegrain bread, brown rice, beans, lentils and chickpeas.
Unsaturated fats	Olive/rapeseed oil, avocado, nuts and seeds where safe.
Omega-3 sources	Oily fish; walnuts, chia, flax and rapeseed oil provide plant omega-3.
Herbs and spices	Ginger, turmeric, garlic, herbs and spices can add flavour and plant compounds.

The pattern matters more than one ingredient

No berry, spice, tea or supplement can compensate for an otherwise poor diet or treat an inflammatory disease on its own.

What Does the Evidence Support?

Mediterranean-style patterns

Much of the strongest evidence relevant to 'anti-inflammatory' eating comes from Mediterranean-style dietary patterns: abundant plant foods, wholegrains and pulses, olive oil, fish where eaten, and less frequent processed meat and highly refined foods.

Heart and metabolic health

These dietary patterns are associated with cardiovascular and metabolic benefits. Improvements may involve blood lipids, blood pressure, glucose regulation, fibre intake and overall dietary quality rather than a single 'inflammation switch'.

Arthritis and inflammatory conditions

People living with inflammatory conditions may be drawn to restrictive diets promising symptom control. A nutritious dietary pattern can support general health, but food should not replace prescribed treatment. Evidence for eliminating broad food groups without a diagnosed reason is often weak.

Gut health

Fibre from varied plant foods supports the gut microbiome. However, people with IBS, inflammatory bowel disease or other gastrointestinal conditions may need individual adjustments during symptom flares.

Supplements

High-dose turmeric/curcumin, fish oil and other supplements are frequently marketed as anti-inflammatory. Supplements can interact with medicines, affect bleeding risk or be inappropriate in some conditions. 'Natural' does not mean risk-free.

Evidence-aware questions

Claim	Useful question
'This food fights inflammation'	Is the evidence about the food itself, a nutrient, a supplement dose or an overall dietary pattern?
'Cut out this food group'	Is there a diagnosed allergy/intolerance or convincing evidence for removal?
'Detox inflammation'	What measurable outcome is being claimed, and is it supported by good human research?

Building an Anti-Inflammatory-Style Plate

Vegetables and fruit

Aim for variety rather than chasing a particular colour or superfood. Fresh, frozen and tinned produce can all contribute. Choose forms that fit budget, sensory needs and digestive tolerance.

Protein

Fish, eggs, poultry, pulses, tofu, tempeh, yoghurt or other suitable proteins can form the centre of a meal. Red meat can still fit for people who eat it; frequency, portion and processing matter.

Carbohydrates

Wholegrains, potatoes, oats, rice, pasta, beans and other carbohydrate foods can be part of the pattern. Anti-inflammatory eating does not require a low-carbohydrate diet.

Fats

Use unsaturated fats such as olive or rapeseed oil more often. Nuts and seeds can contribute where safe. Oily fish provides long-chain omega-3 fats.

A practical plate

Part	Examples
Produce	Vegetables and/or fruit in forms you tolerate.
Protein	Fish, poultry, eggs, beans, lentils, tofu or another suitable source.
Fibre-rich carbohydrate	Wholegrains, potatoes, pulses or other suitable staples.
Unsaturated fat	Olive/rapeseed oil, avocado, nuts/seeds where safe.
Flavour	Herbs, spices, lemon or tolerated alternatives, sauces and seasonings.

Enjoyment is part of sustainability

A diet can be nutrient-rich and still include favourite foods. Repeated guilt or fear around eating is not an anti-inflammatory strategy.

Shopping, Cooking, Budget & Everyday Life

Shopping basket

Cupboard/freezer	Fresh/chilled
Beans, lentils and chickpeas	Seasonal vegetables and fruit
Oats and wholegrains	Eggs, fish, tofu or suitable proteins
Tinned tomatoes/vegetables	Yoghurt or suitable alternative
Frozen berries/vegetables	Leafy greens and herbs
Olive/rapeseed oil	Avocado where affordable

Budget

An anti-inflammatory-style diet does not require powders, juices or expensive berries. Oats, beans, lentils, frozen vegetables, tinned tomatoes, potatoes and seasonal produce can provide an affordable foundation.

Cooking

Roasting, baking, steaming, grilling, stewing and stir-frying can all work. Herbs and spices add flavour, but they do not need to be consumed in medicinal quantities.

Processed foods

Processing exists on a spectrum. Tinned beans, frozen vegetables, wholegrain bread and fortified foods are processed yet can be useful and nutritious. Focus on the whole nutritional pattern rather than fearing a category.

Eating out

Choose meals with vegetables, a protein source, a carbohydrate and an appropriate fat where possible. One restaurant meal does not determine inflammation or health.

Sleep, movement and stress

Diet is only one part of health. Sleep, physical activity, smoking, alcohol, stress, medical treatment and social circumstances can all influence wellbeing and inflammatory processes.

ARFID, Allergies, Chronic Illness & Restrictive Eating

ARFID and sensory needs

Advice to 'eat the rainbow' can feel impossible when the safe-food range is small. Start with foods already accepted and make changes gently. A reliable safe food is more valuable than an idealised food that cannot be eaten.

Allergy and intolerance

Avoid foods that are medically unsafe or genuinely intolerable, but do not add exclusions simply because an online list labels them 'inflammatory'. Multiple unnecessary exclusions can reduce nutritional adequacy.

Eating disorders

Anti-inflammatory eating can become a socially acceptable route into restriction or 'clean eating'. Warning signs include fear of ordinary foods, increasing forbidden-food lists, distress about eating out, compulsive ingredient checking or believing a single food will cause bodily harm.

Chronic inflammatory disease

Rheumatoid arthritis, inflammatory bowel disease, psoriasis and other inflammatory conditions require appropriate medical care. Diet may complement treatment and support general health, but it should not replace medication or specialist advice.

Medication and supplements

Some supplements promoted for inflammation can interact with anticoagulants, diabetes medicines or other treatments. Discuss concentrated supplements with a pharmacist or clinician.

Individual digestive tolerance

A diet rich in pulses, wholegrains and vegetables may need gradual introduction if fibre intake has been low. People with gastrointestinal disease may need specialist dietetic support.

Support health without turning inflammation into something you feel responsible for controlling perfectly through food.

Myths, Personal Check-In & Sources

Common myths

“Certain foods cause all inflammation.” Inflammation is biologically complex. **“Nightshades are inflammatory for everyone.”** There is no good basis for universal avoidance. **“Sugar instantly causes chronic inflammation.”** Overall dietary pattern and long-term intake matter more than a single food. **“Turmeric cures inflammatory disease.”** It does not replace medical treatment. **“Anti-inflammatory means gluten-free or dairy-free.”** Not unless there is an individual reason to avoid those foods.

Personal check-in

- Am I focusing on my overall eating pattern rather than miracle foods?
- Can I add more variety without creating rigid rules?
- Do I include fibre-rich plant foods that I tolerate?
- Are most of my fats coming from appropriate unsaturated sources?
- Do my meals contain enough protein and energy?
- Am I excluding foods because of evidence or because of fear?
- Do ARFID, allergies or digestive conditions require a more individual approach?
- Am I using supplements that could interact with medication?
- Is my eating pattern supporting wellbeing rather than increasing anxiety?

A message from Space to Breathe Therapy

You do not have to eat perfectly to support your health. An anti-inflammatory approach is most useful when it means adding nourishing foods, variety and balance - not fearing ordinary meals or blaming yourself for symptoms. Food can support the body, but it does not have to carry the whole responsibility for your health.

Evidence and further reading

NHS: balanced eating, cardiovascular health and condition-specific health information.

British Heart Foundation: evidence-based guidance on Mediterranean-style eating, fats and heart health.

British Dietetic Association: evidence-based information on healthy dietary patterns and condition-specific nutrition.

NICE: clinical guidance for inflammatory and long-term conditions: dietary changes should complement, not replace, appropriate treatment.

Educational information only. This guide is not a treatment for inflammatory disease and does not replace medical or dietetic advice.