MAST CELL ACTION

Reintroducing Foods Safely

Nourishing Health and Happiness with MCAS

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Patient Information Forum



Registered Charity Number 1164917

Disclaimers

Trigger warning - this document is about food and contains images of food.

We recognise that many of the images in this guide contain foods that are restricted on low histamine diets. The images are from stock photos and do not exactly reflect a low histamine diet. We have done our best to reduce references to high-histamine foods wherever possible.

Everyone with MCAS is different, and this is general information, not tailored to your individual needs. This resource is intended to be used alongside support from a qualified health professional. Please seek advice from your medical practitioner or dietitian for specific dietary guidance.

We hope you will be confident to adapt the guidance and recipes for your circumstances, and swap out foods that you are not able to tolerate for others that you are.

This sheet is designed for adults with Mast Cell Activation Syndrome. The nutritional needs of children and teenagers will differ, and the nutritional needs of individuals with specific medical conditions will vary.

If your diet is very limited and you feel that you are struggling to get enough nutrients in your diet or have a specific medical condition that may have specific dietary needs, then please ensure you seek individualised dietary advice from a dietitian with experience in this area.

This resource is designed to support, not replace, tailored advice from your medical team.

For more information about low histamine diets and other dietary adjustments, please see our Self-Management Toolkit HERE

Introduction

Why Does Diet Matter?

Diet plays a really important role in helping those with MCAS, but can also be one of the trickiest areas to navigate, as those with MCAS often have dietary triggers.

What you eat can directly influence mast cell behaviour and histamine levels in the body.

Common Dietary Challenges with MCAS

People with MCAS often face considerable challenges with food, including:

- Food sensitivities and intolerances: MCAS can cause reactivity to a wide range of foods.
- Variable and evolving triggers: Food triggers can change over time or vary based on other factors such as stress, hormone levels, illness, or environmental exposures.
- Digestive issues: Symptoms like bloating, nausea, abdominal pain, and altered bowel habits are common and may require additional dietary adjustments.
- Nutritional adequacy: Due to multiple food restrictions, maintaining a balanced, nutrient-rich diet can be difficult without careful planning.

Reintroducing Foods Safely

Many people with MCAS have tried elimination diets or had to reduce their diet to a small group of "safe" foods to control symptoms. While this can help short term, staying on a very limited diet for a longer period of time can lead to nutrient deficiencies, food fear, and a reduced quality of life. A structured reintroduction plan can help you expand your diet while keeping symptoms manageable.

Why reintroduce foods?

- Improve nutrition and variety
- Prevent nutritional deficiencies
- Reduce food anxiety
- Support mental health by improving social interaction
- Support gut health and potentially tolerance to a wider range of foods over time
- To maintain a healthy weight

Tips for re-introducing foods

1 Start during a more stable period if possible. Only begin reintroductions when your symptoms have been relatively stable for at least 1–2 weeks. This helps you see clearly if a new food causes a reaction.

2 One new food at a time. Introduce a single food before adding another.

3 Start with tiny amounts first and build up the portion size - see suggested re-introduction process below.

4 Only change one thing at a time. For example if you are trying a new medication or a new supplement then don't try a new food at the same time as it will be hard to tell what you are reacting to if a reaction occurs.



Example Reintroduction Process

When you feel ready to begin to reintroduce foods, don't feel rushed. It's ok to take this slowly, and explore what works for you.

Try a very tiny amount of the food first, possibly even one bite, just to establish if you are reacting to it.

If you don't immediately react, you might want to explore the following process.

Example re-introduction process:

- Day 1: ⅓ of your regular portion
- Day 2: ½ of your regular portion
- Day 3: Usual portion size

Consider leaving a day between increasing the portion size or build up even slower than this if:

- You have avoided the food for a long time
- You feel fearful of re-introduction
- You are really sensitive to small changes
- Your reactions are more delayed.

Work with a specialist - a dietitian experienced in MCAS can help you create a gradual reintroduction plan.



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