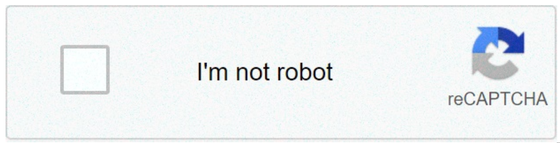

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Carbohydrates that cannot be digested

Types of carbohydrates that cannot be digested. Name the carbohydrates that cannot be digested by humans. Carbohydrates that cannot be digested by humans. A fibrous form of carbohydrates that cannot be digested is. Carbohydrates that cannot be digested by the body are called what. Which type of carbohydrate cannot be digested by humans.

Carbohydrate intolerance is the inability of the small intestine to completely process nutrient carbohydrate (a classification that includes sugars and starches) in a source of energy for the body. This is usually due to the lack of an enzyme needed for digestion. Lactose intolerance is the inability to digest sugar found in milk. Carbohydrates are the main source of energy and, along with fats and proteins, one of the three main nutrients in the human diet. Carbohydrates are classified according to their structure, depending on the number of basic sugar, or saccaride, units contain. A monosaccharide, called simple sugar, is the simplest carbohydrate. Simple sugars include glucose (the form in which sugar circulates in the blood), fructose (find in fruit and honey) and galactose (produced by milk digestion). These simple sugars are important because they can be absorbed by the small intestine. Two simple sugars connected together form a disaccharide. The disaccharides present in the diet are maltousins (a product of starch digestion), sucrose (table sugar) and lactose (sugar in milk). These disaccharides must be divided by enzymes in two simple sugars so that they can be absorbed by the intestine. Polysaccharides are much more complex carbohydrates composed of many simple sugars. The most important polysaccharides are glycogens, which are preserved in the liver and cellulose (myde). Food digestion begins in the mouth, moves on the stomach, and then in the small intestine. Along the way, specific enzymes are required to process different types of sugar. An enzyme is a substance that acts as a catalyst to produce chemical changes without being changed. Lactase, maltase and isomaltase enzymes (or sucrasis) are necessary to break down disaccharides; When one or more is inadequate, the result is carbohydrate intolerance. Carbohydrate intolerance can be congenital, primary or secondary. Congenital deficiency is caused by an enzyme defect present at birth. Alactasia is a very rare congenital condition and the result of a genetic defect that causes the complete absence of lactase, the enzyme necessary to digest milk sugar. Primary deficiency is caused by an enzyme defect developed over time. The most common is lactose intolerance. Secondary deficiencies, often caused by a disease or disorder of the intestinal tract, disappear when the underlying cause is treated. Secondary deficiencies include protein deficiency, pancreatis, celiac disease, short bowel syndrome and some intestinal infections. Chronic renal failure and some drugs can also cause secondary shortcomings. Lactose intolerance is widespread, affecting about 20% of American children and up to 70% of the world's adult population.Lactose is the most common of all enzyme deficiencies and an estimated 30 â¨¬ “50 million Americans have this condition. Some racial and ethnic populations are more interested than others. others. Lactose intolerance is found in as many as 75 percent of African Americans, American Jews, Mexican Americans and Native Americans, and in 90 percent or more of Asian Americans and some Mediterranean peoples. Descendants of Northern Europe usually do not develop the condition (the incidence is less than 20 percent in these populations). Deficiencies in enzymes other than lactase are extremely rare. Causes and Symptoms Enzymes play an important role in breaking down carbohydrates into forms that can pass through the intestine and be used by the body. They are usually called by adding axes to the name of the substance on which they act (for example, lactase is the enzyme needed to make lactose). In the mouth, cooked starch is broken to a disaccharide by amylase, an enzyme in saliva. Disaccharides maltose, sucrose and lactose cannot be absorbed until they have been separated into simple sugar molecules by their corresponding enzymes in the cells lining the intestinal tract. If this process is not completed, digestion is stopped. Although uncommon, a deficiency in the enzymes needed to digest lactose, maltose and sucrose is sometimes present at birth. Intestinal lactase enzymes usually decrease naturally with age, but this occurs to varying degrees. Due to the uneven distribution of enzyme deficiency based on race and ethnic background, particularly in lactose intolerance, genetics is believed to play a role in the cause of primary carbohydrate intolerance. Digestive diseases such as celiac disease and tropical spruce (which affect absorption in the intestine), as well as intestinal infections and lesions, can reduce the amount of enzymes produced. In cancer patients, treatment with radiation therapy or chemotherapy may affect the cells in the intestine that normally secrete lactase, leading to intolerance. The severity of symptoms depends on the extent of the enzyme deficiency, and varies from a feeling of mild swelling to severe diarrhea. In the case of a lactase deficiency, undigested milk sugar remains in the intestine, which is then fermented by normal intestinal bacteria. These bacteria produce gas, cramps, swelling, a “gurgly” feeling in the abdomen, and flatulence. In a growing child, the main symptoms are diarrhea and weight loss. The lactase deficiency causes gastrointestinal distress to begin about 30 minutes to two hours after eating or drinking foods containing lactose. Food intolerances can be confused with food allergies, as the symptoms of nausea, cramps, swelling and diarrhea are similar. Food intolerances involve an exaggerated or abnormal physical reaction to a food or food additive and are not associated with an immune response. Food allergies involve a immune. sugars that are not subdivided into one of the simplest forms cause the body to push the fluid into the intestine, which results in aqueous diarrhea (osmotic diarrhea).Outside the intestine before they can be absorbed, causing malnutrition. If a child has the following symptoms, the parent must contact the child's pediatrician or gastroenterologist: abdominal pain, vomiting or diarrhea waking up the child during the night Persistent or severe abdominal pain or diarrhea unexplained weight loss blood bleeding blood or mucus in the stool Fever Your doctor can recommend a lactose-free diet for two or three weeks to determine if the lactose intolerance is the cause of the symptoms. During the period without lactose, the child must avoid all products containing lactose. The parent and child must record all food and drink and note when symptoms occur after eating or drunk. To identify other foods or drinks that cause problems, it is useful that the parent and child keep a diary of symptoms for two or three weeks. The doctor can then review the diary with the parent and the child to identify any problematic foods. The diagnosis of intolerance to carbohydrates or lactose is supported by the presence of symptoms related to the condition. Furthermore, the primary pediatrician or gastroenterologist can confirm the diagnosis after questioning the child (if great enough to provide an accurate story of symptoms) or the parent about his physical health, performing a physical examination and ordering laboratory tests to exclude others Similar conditions for carbohydrate intolerance. When you suspect carbohydrate intolerance, the diagnosis can be confirmed with oral tolerance tests. The carbohydrate in question is administered orally in liquid form. Several blood levels are measured and compared with normal values. This helps you evaluate the individual's ability to digest sugar. To identify lactose intolerance in children and adults, the hydrogen expirated test is used to measure the quantity of hydrogen in the expire the patient drinks a lactose containing drink and the breath is analyzed at intervals Regular. If the lactose did not digest in the whole intestine (colon) is fermented by the bacteria, various gases are produced. The hydrogen is absorbed by the intestine and transported from the bloodstream into the lungs, where it is exhaled. Normally, the hydrogen detectable in the exhaled is very scarce; Therefore, its presence indicates a bad digestion of lactose. When lactose intolerance is suspected in newborns and small children, many pediatricians simply recommend switching from cow milk to soy formula and look for improvement. If necessary, you can test the acidity of a feces sample. Inadequate lactose digestion will lead to an increase in acid in waste excreted from the intestine and the presence of glucose. Intolerance to carbohydrates caused by temporary intestinal diseases When the condition is successfully treated. In the primary conditions, there is no treatment to improve the capacity of the organism to produce enzymes, but the symptoms can be controlled with the diet. A product marketed from Banco Banco The Beano brand contains the alpha-galacctosidase enzyme that works with the digestive body system to break down complex carbohydrates in simple sugars that are easily digested. Beano has taken just before consuming foods that produce gas. Because there is a wide variance in the degree of lactose intolerance, the treatment must be customized for the individual. Dairy products must be avoided in small children who have signs of lactose intolerance. The child's doctor or registered dietitian can help you make dietary adjustments and can advise when you gradually start reintroducing dairy products, if applicable. In newborns, the transition to soy-based formula can help. The special formulas, such as a formula based on glucose polymers, or a casein-based formula, can be recommended in newborns with severe carbohydrate intolerance or when the symptoms are serious. Older children can adjust their lactose intake, depending on how much and what can tolerate. For some, a small glass of milk will not cause problems, while others may be able to manage ice cream or seasoned cheeses such as Cheddar or Swiss, but not other dairy products. Generally, small amounts of food containing lactose consumed during the day are better tolerated than a great quantity consumed all at once. For those who are very small to quantities that are also very small in lactose, the supplement of lactase enzymes is available without a medical prescription. The supplement is available in liquid form for use with milk. Adding some drops to a quarter of milk will reduce the lactose content of 70% after 24 hours in the refrigerator. The heating of the milk accelerates the process, and doubling the quantity of lactase liquid will translate into milk which is 90% free lactose. Enzyme lactase chewable tables are also available. Three to six tablets taken before a meal or a snack will help in the digestion of solid foods. Lactose-reduced milk and other products are also available in stores. Lactose-reduced milk contains the same nutrients of normal milk. Since dairy products are an important source of calcium, people who reduce or seriously limit their recruitment of these foods and drinks may need to consider other ways to consume an adequate amount of calcium. The intake of calcium supplements or the choice of other foods with a high football content can be necessary to satisfy the recommended daily football requirement. Furthermore, high foods in vitamin A, riboflavin and vitamin B 12 should be included in the daily diet to compensate for nutrients normally present in vaccine milk. Alternative and complementary therapies include approaches that are considered outside the mainstream Traditional health. The list of alternative treatments for carbohydrate intolerance includes aromatherapy, homeopathy, hydrotherapy, therapy juices, acupuncture, chiropractic, osteopathy, naturopathic medicine and traditional Chinese herbal medicine. Before learning or practicing any particular technique, it is important for the parent or caregiver and the child of treatment, its safety and efficacy, potential side effects, as well as the skills and qualifications of the medical specialist. While some practices are beneficial, others can be harmful for some patients. Relaxation techniques and dietary supplements should not replace medical therapies prescribed by your doctor. Parents should discuss alternative treatments with their child’s doctor to determine techniques and remedies that may be beneficial to their child. Carbohydrate intolerance has a very low mortality rate. Babies and infants have a higher risk of chronic diarrhea and malnutrition due to carbohydrate intolerance. With good dietary management, children with carbohydrate intolerance can lead a normal life. Since the cause of enzyme deficiency leading to carbohydrate intolerance is unknown, there is no way to prevent this condition. To help prevent or reduce your child’s symptoms, parents may: Alactasia “A rare inherited disease that causes a lack of the enzyme needed to digest milk sugar. Celiac disease â a disease that occurs in both children and adults, caused by sensitivity to gluten, a protein found in cereals. It results in chronic inflammation and narrowing of the lining of the small intestine. Also called gluten enteropathy or nontropical materozza. Cellulose is the primary substance that makes up the cell walls or fibers of all plant tissues. Constipation “Difficult bowel movements caused by the infrequent production of hard stools. Defecation “The act of having a bowel movement or passing stool through the bowel. Diarrhoea: watery and loose faeces. Digestion “The mechanical, chemical and enzymatic process by which food is converted into substances suitable for use by the body. Enzyme is a protein that catalyzes a biochemical reaction without modifying its structure or function. Faeces “Solid waste, also called faeces, which is left after the digestion of food. Feces form in the intestine and pass through the body through the intestine. Gastroenterologist “A doctor specializing in diseases of the digestive system. Hydrogen test: A test used to determine if a person is lactose intolerant or if abnormal bacteria are present in the colon. Lactose “A sugar found in milk and dairy products. Metabolism “The sum of all chemical reactions occurring in the body resulting in growth, transformation of food into energy, elimination of waste and other bodily functions. These include processes that break down substances to produce energy and processes that produce other substances necessary for life. Nutrients in foods that provide the body with the elements needed for metabolism. Examples of nutrients are: Minerals, carbohydrates, fats and proteins. Peristalsi Â «Lent rhythmic contractions of the muscles of a tubular organ, such as the intestine, which move the long content. Sugars Â Â «Carbohydrate ones having the general composition of a part part two parts of hydrogen and one part of oxygen. help the child identify and avoid problematic foods work with a registered dietitian to facilitate specific dietary changes incorporate changes into the child’s diet gradually, giving his body time to adjust to set predetermined meal times, and not allow the child to skip a meal encourage the child to drink at least eight glasses of water a day encourage your child to eat more slowly offer smaller and more frequent meals Parents should confirm with their child that carbohydrate intolerance is not a life-threatening condition and that dietary changes can help reduce symptoms. They should remind your child that it may take a few months before he or she sees a substantial improvement in symptoms. Macdonald Resources, Ian. Â“Carbohydrates.Â” In Modern Nutrition in Health and Disease, ninth ed. Maurice E. Shils, ed., et al. Philadelphia: Lippincott Williams & Wilkins, 1998. Williams, Sue Rodwellm and Eleanor Schlenker. Essentials of Nutrition and Diet Therapy, 8a ed. Philadelphia: C.V. Mosby, 2002. American College of Gastroenterology (ACG). P.O. Box 3099, Alexandria, VA 22 302. (703) 820-7400. Website: . American Gastroenterological Association. 4930 Del Ray Ave., Bethesda, MD 20Â 814. (301) 654-2055. Website: . International Foundation for Functional Gastrointestinal Disorders (IFFGD). P.O. Box 170 864, Milwaukee, WI 53 217-8076. (888) 964-2001. Website: . National Digestive Diseases Information Clearinghouse (NDDIC). 2 Information Way, Bethesda, MD 20Â 892-3570. (800) 891-5389. Website: . Karen Ericson, R.N. Angela M. Costello Other articles that may interest you:

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