



THE SOLINGER METHOD

by Root Health L.L.C.

Diverticular Disease

FUNCTIONAL WELLNESS SUPPORT PLAN

Adult Diverticular Disease

Root Health L.L.C, The Solinger Method

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What Is Diverticular Disease

Diverticular disease refers to the presence of diverticula, small outpouchings in the colon wall, and the symptoms or complications that may arise from them. Many individuals have diverticulosis without symptoms, issues develop when motility, pressure, inflammation, or microbial imbalance compromise colonic integrity.

In adults, diverticular disease commonly reflects:

- Chronic constipation and increased colonic pressure
- Low dietary fiber over time
- Dysbiosis and altered fermentation patterns

- Inadequate hydration
- Inflammation of the colonic wall
- Impaired connective tissue integrity

Diverticula themselves are not the problem, **the terrain that formed them is.**

Conventional Medicine Perspective

Conventional medicine typically views diverticular disease as:

- A structural condition of the colon
- Managed conservatively unless complications arise
- Treated acutely during inflammation

Common approaches include:

- Antibiotics during diverticulitis flares
- Low fiber diets during acute episodes
- Surgical intervention in severe or recurrent cases

While appropriate during acute inflammation, this model often overlooks:

- Why colonic pressure remains elevated
- How microbiome imbalance contributes
- The role of long term motility and stool quality

Structural change does not negate functional opportunity.

Naturopathic Medicine Perspective

Naturopathic medicine views diverticular disease as a motility, pressure, and microbiome issue, influenced by diet, hydration, inflammation, and connective tissue support.

Key systems involved include:

- Colonic motility and stool consistency
- Fiber fermentation and microbial balance
- Inflammatory regulation
- Connective tissue health
- Nervous system influence on bowel tone

The goal is to reduce pressure, support motility, and prevent inflammation, not create dietary fear.



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Key Drivers and Patterns in Adult Diverticular Disease

Constipation Dominant Pattern

- Infrequent or hard stools
- Straining
- Abdominal pressure

Dysbiosis Pattern

- Bloating or gas
- Stool irregularity
- History of antibiotics

Inflammatory Pattern

- Left lower quadrant discomfort
- History of diverticulitis
- Elevated inflammatory markers

Dehydration Pattern

- Low fluid intake
- Dry stools
- Fatigue

Nutritional Strategy

Nutrition for diverticular disease focuses on supporting stool softness, motility, and colonic health, not blanket restriction.

Core Nutritional Priorities

- Maintain regular bowel movements
- Increase soluble fiber gradually
- Ensure adequate hydration
- Reduce colonic pressure
- Support microbial fermentation

Therapeutic Foods to Emphasize



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Soluble Fiber Sources

- Oats
- Chia seeds
- Psyllium husk
- Cooked vegetables

Soluble fiber softens stool and reduces pressure.

Hydrating Foods

- Soups and broths
 - Stewed fruits
 - Cooked vegetables
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Protein Adequacy

Supports tissue repair and immune balance.

Suggested intake:

25 to 35 grams per meal

Healthy Fats

- Olive oil
- Avocado
- Butter or ghee

Support stool lubrication.

Reduce or Avoid During Flares

- Large amounts of raw vegetables
- Nuts and seeds only if irritating
- Highly processed foods

During remission, most foods can be reintroduced thoughtfully.

Targeted Supplement Support



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Therapeutic Adult Dosing

Soluble Fiber Supplement (Psyllium or PHGG)

Supports stool softness and motility.

Dose: 5 to 10 grams daily, titrated slowly

Magnesium Citrate or Glycinate

Supports bowel regularity and muscle relaxation.

Dose: 300 to 500 mg daily

Probiotic (Broad Spectrum)

Supports microbial balance and fermentation.

Dose: 20 to 50 billion CFU daily

Omega 3 Fatty Acids (EPA/DHA)

Supports inflammatory regulation.

Dose: 3 to 4 grams daily combined EPA and DHA

Targeted Herbal Support

Slippery Elm

Soothes colonic lining and supports stool consistency.

Dose: 400 to 800 mg daily

Marshmallow Root

Supports mucosal integrity.

Dose: 500 to 1,000 mg daily

Triphala



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Supports gentle motility and bowel tone.

Dose: 500 to 1,000 mg daily

Black Licorice Root (*Glycyrrhiza glabra*)

Black licorice is a powerful anti-inflammatory, demulcent, and tissue-supportive herb that plays an important role in diverticular disease by supporting colonic mucosal integrity and reducing inflammatory irritation.

Supports diverticular disease by:

- Reducing inflammation of the colonic lining
- Supporting mucosal healing and integrity
- Reducing irritation within diverticula
- Supporting smooth muscle tone and bowel comfort

Dose:

500 to 1,000 mg daily of whole root extract

Clinical Notes:

- Avoid in individuals with uncontrolled hypertension
- DGL is preferred if blood pressure is a concern
- Particularly helpful during post-flare healing and chronic irritation patterns

Herbs here support **movement and protection**, not stimulation.

Celery Juice Support for Diverticular Disease

Celery juice may support diverticular disease by improving **hydration, mineral balance, and bowel regularity**, particularly in constipation dominant patterns.

Dose:

6 to 8 oz daily

Timing:

Morning or between meals

Discontinue during acute diverticulitis.

Supplement Access



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A complete supplement protocol for **Adult Diverticular Disease** is available in Fullscript under **Protocols**, listed by the matching condition name. Individuals can create a free account to access the full recommended list of professional grade supplements and therapeutic adult dosing.

Lifestyle Support That Matters

- Respond promptly to the urge to defecate
 - Avoid chronic straining
 - Gentle daily movement
 - Adequate hydration throughout the day
- Colonic health improves with rhythm and softness.
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When to Dig Deeper

Further evaluation is warranted when symptoms persist or recur:

- Stool testing
- Inflammatory markers
- Imaging when indicated
- Nutrient status

Diverticular disease remains stable when pressure is reduced, motility is supported, and inflammation is controlled.



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