

Food News



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Insights Issue



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Welcome to Food News

Autumn 2026 edition

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It is back to school and back to work for many people. In this season's edition, our Student Dietitians are looking at social media trends: "fibremaxxing" and "detoxing". Which of these trends stem from a bit of truth, and which do not?

As always, we will look at which fruits and vegetables are in season, along with a lovely seasonal recipe for you to try.



Food News purpose and community introduction

Food News is produced by the education & choice sub-group of Warwickshire Food forum and is published quarterly.

The forum is a multi-agency partnership aiming to improve food choices for people in Warwickshire.

The focus is on making food affordable, sustainable and providing information to help people make healthy choices. The group will also ensure that there is Warwickshire wide help for people who have difficulty affording food.



Fibremaxxing: good health or hype?

Tik Tok wellness has discovered fibre. The science got there first.

Fibremaxxing is the social-media trend of deliberately adding more fibre-rich foods to the day — think oats, pulses, fruit, vegetables, nuts, seeds and wholegrains. Recent media coverage shows creators layering chia, beans and vegetables into meals and reporting benefits such as better bowel habits or less bloating (Raiken, 2025; Foster, 2026).



Good trend, questionable name?

Unlike many wellness fads, fibremaxxing starts with a genuine public-health problem: most people in the UK are not eating enough fibre.

30 g/day

adult population recommendation

4%

of adults met the fibre recommendation

16–17 g

average adult intake per day

Adult recommendation: SACN (2015). Current intake data: Office for Health Improvement and Disparities (2025).



Daily fibre recommendations by age (SACN, 2015)

Ages 2–5

15 g/day

Ages 5–11

20 g/day

Ages 11–16

25 g/day

16+ / adults

30 g/day

Why fibre matters

Evidence summary: Reynolds et al. (2019); Vinelli et al. (2022).



Heart health

Higher fibre intakes are linked with lower cardiovascular disease and mortality risk.



Type 2 diabetes

Higher fibre intake is linked with lower type 2 diabetes risk and better markers of carbohydrate quality.



Bowel health

Fibre supports bowel function and higher intakes are linked with lower colorectal cancer risk.



Gut microbes

Different fibres can alter gut bacteria and short-chain fatty acid production.

Easy swaps:



white toast



wholemeal toast



crisps



roasted chickpeas



low-fibre cereal



porridge with berries

Scroll vs science

The wellness feed loves a simple rule. Your gut is less cooperative.

“More fibre is always better.”



Not quite. The UK adult recommendation is around 30 g/day, not “as much as possible”. Media coverage has reported fibremaxxers pushing well beyond recommendations, but more is not automatically better (SACN, 2015; Manek, 2026).

“Fibre fixes IBS (Irritable Bowel Syndrome).”



Too simple. In people with IBS (irritable bowel syndrome), a systematic review and meta-analysis found benefit mainly with soluble fibre (dissolves in water and forms a gel, e.g. psyllium). Insoluble fibre (adds bulk to stools e.g. wheat bran), did not show the same benefit and may worsen bloating or discomfort in some people. Fibre type matters (Moayyedi et al., 2014).

“My bloating disappeared — try this.”



Anecdote is not evidence. TikTok posts reported in the media include personal claims of less bloating and constipation after increasing fibre. Useful inspiration, perhaps, but one person's experience cannot prove cause and effect (Raiken, 2025).

“A scoop of fibre powder = job done.”



Food first. SACN recommends achieving fibre intake through a **variety of food sources**. Isolated fibres can have specific effects, but they do not automatically reproduce the full benefits of a varied fibre-rich diet (SACN, 2015).



Current coverage has framed fibre as the “new protein”, with TikTok feeds full of high-fibre bowls, grocery hauls and supplements (Foster, 2026; Manek, 2026).

Not all fibre behaves the same way

Soluble fibres such as beta-glucan and psyllium can form gels and have specific effects on cholesterol or bowel symptoms. Sources include oats, barley and psyllium husk.

Insoluble fibres can add bulk to stool, but is not automatically helpful for everyone with IBS. Sources include wholegrain bread and wholegrain cereals.

Fermentable fibres feed gut bacteria — useful, but fermentation also produces gas. Sources include beans and lentils, onions and garlic and resistant starch from cooled potatoes or rice.

Your gut usually prefers consistency over drama.

Increase fibre gradually rather than turning breakfast into a structural engineering project overnight.

“Beans, beans, good for your heart,
the more you eat, the more you f--t.”

There is biology behind it: fermentable carbohydrate and fibre can increase gas. The answer is not to fear beans — it is to build fibre up gradually.

Worth remembering: bloating, wind or a change in bowel habit after a sudden fibre jump does not mean fibre is “bad”. Dose, type, hydration and individual tolerance all matter.

Fibremaxxing is not for everyone

For most people, more fibre is useful. For some, “maxxing” is exactly the wrong goal.

Who may need caution?

- **Symptomatic bowel strictures or obstruction risk.** Current Irritable Bowel Disease (IBD) guidance advises individualised dietary modification where narrowing makes coarse fibrous foods difficult to tolerate (Hashash et al., 2024).
- **Gastroparesis.** Dietary management often focuses on smaller-particle and lower-fat approaches; large, coarse foods may worsen symptoms for some people (Eseonu et al., 2022).
- **Ileostomy or high-output stoma.** Advice varies with output, symptoms and stage after surgery. Evidence is M, so blanket “high-fibre” advice is inappropriate (Mitchell et al., 2021).
- **Recent bowel surgery, acute inflammation or a prescribed low-fibre/texture-modified diet.** Follow your clinical plan rather than a social-media target.

Important: this is not a list of people who should avoid fibre forever. The amount, type and texture may need to be modified and reviewed individually.

How to fibre-max sensibly

- 1 **Increase gradually.** One or two changes at a time gives your gut a chance to adapt.
- 2 **Drink enough.** Fibre works best with adequate fluid, unless you have been given a fluid restriction.
- 3 **Aim for variety.** Wholegrains, fruit, vegetables, pulses, nuts and seeds bring different fibres and nutrients.
- 4 **Use easy swaps.** Wholemeal bread, porridge oats, beans, lentils and berries can raise intake without turning meals upside down.
- 5 **Listen to symptoms.** Persistent pain, vomiting, severe bloating or worsening bowel symptoms need clinical advice — not another scoop of fibre.



For people with gut conditions, the right amount and type of fibre depends on symptoms and stage of recovery not on a social-media target.



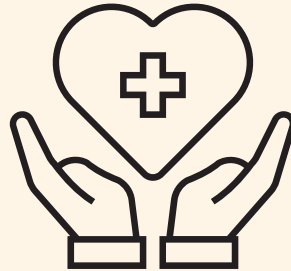
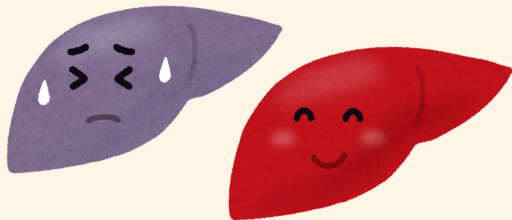
The bottom line

Fibremaxxing may be one of the few TikTok wellness trends with a solid scientific idea underneath it. But the useful message is “**eat enough fibre from a variety of foods**”, not “**eat the maximum fibre you can tolerate**”. For adults, the population recommendation is around 30 g/day (SACN, 2015). If you have a bowel condition, stoma, recent bowel surgery or ongoing gut symptoms, check with your dietitian or healthcare professional before making major changes.

Your Liver Does not Need a Detox – But it Might Need Your Help!

Detox teas, juice cleanses, apple cider vinegar and liver supplements are often promoted as ways to “clean” the liver.

But **your liver already removes waste products and helps process substances in your body every day!**



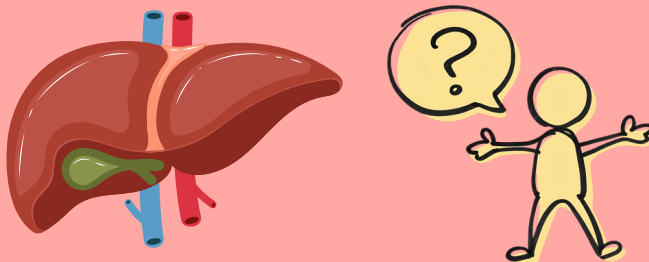
Did You Know?

[National Institute for Health and Care Excellence (NICE), 2016]

- **Fatty liver disease is not only caused by alcohol.**
- NICE estimates that around **20–30% of the general population** has non-alcoholic fatty liver disease (NAFLD). It is more common in people with type 2 diabetes and metabolic syndrome.
- The newer name for NAFLD is **metabolic dysfunction-associated steatotic liver disease (MASLD)**.

Key point: You do not have to drink heavily to develop fatty liver disease

What does the Liver do?



The liver is **the body's largest internal organ**

It has many important jobs. These include:

- helping to process the nutrients from food
- storing energy, vitamins and minerals
- making proteins that the body needs
- making bile, which helps us digest fat
- helping the body process medicines and alcohol
- helping to remove waste products and harmful substances from the blood.

[British Association for Nutrition and Lifestyle Medicine (BANT), 2025]

Remember: There are many other causes of liver disease, including viral hepatitis, some medicines and inherited conditions. If you are worried about your liver, speak to your GP or healthcare professional.

What is Fatty Liver Disease?

[NHS, 2025; NHS, 2026]

Fatty liver disease means that too much fat has built up in the liver.

There are different types and causes:

Alcohol-related liver disease (ARLD)

Drinking too much alcohol over time can damage the liver. The first stage can be ARLD, where fat builds up in the liver - may cause no symptoms. If drinking continues, the liver can become inflamed and scarred.

Metabolic dysfunction-associated steatotic liver disease (MASLD)

This is linked to problems with the body's metabolism. **Metabolism** means the way the body uses and stores energy.

MASLD is linked with:

- overweight and obesity
- type 2 diabetes mellitus (T2DM)
- insulin resistance
- high blood pressure
- high cholesterol or triglycerides
- carrying more weight around the waist
- low levels of physical activity

NICE advises that NAFLD is more common in people with **T2DM or metabolic syndrome**.

T2DM: where the body does not use insulin effectively, causing blood sugar levels to become too high.

Metabolic syndrome: a group of conditions, including high blood pressure, high blood sugar and high cholesterol that increase the risk of heart disease and diabetes.

MYTHS vs FACTS

"I don't drink much, so I can't have fatty liver disease."

MYTH!



MASLD is linked to metabolic health rather than heavy alcohol use. It can affect people who drink little or no alcohol.

"I feel well, so my liver must be healthy."

MYTH!

Fatty liver disease often causes no symptoms. It may only be found during tests for another reason.
[Mayo Clinic, 2026]



"A detox tea will clean my liver."

MYTH!

There is no good clinical evidence that detox teas remove toxins from the liver or treat fatty liver disease.

"Apple cider vinegar can detox my liver."



MYTH!

Apple cider vinegar is sometimes promoted as a "detox". However, it is not recommended by NICE or NHS guidance as a treatment for liver disease, and there is no good clinical evidence that it cleans or repairs the liver.
[UCLH Health, 2026]



"If I already eat well, a liver supplement will give me extra protection."

MYTH!

There is no good evidence that a "liver detox" supplement adds extra liver protection when you are already following a healthy lifestyle.
[NIHR Biomedical Research Centre: Birmingham, 2026]

So, what can actually help your liver?

Evidence shows that small, healthy changes can make a difference.

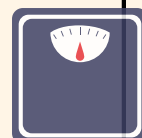
EAT A BALANCED DIET

The Eat Well Guide recommends:

-  Eating at least **5 portions of fruit and veg** each day
-  Choosing **wholegrain or higher-fibre** starchy foods
-  including beans, pulses, fish, eggs, meat and other **protein foods**
-  Choosing **lower-fat, lower-sugar** dairy or alternatives where appropriate
-  Choosing **unsaturated oils and spreads** in small amounts
-  Having foods high in fat, salt and sugar **less often and in small amounts**

WHAT ABOUT WEIGHT?

- If you are living with overweight or obesity, gradual weight loss can help reduce fat in the liver.
- The British Liver Trust reports that losing 5–10% of body weight can help control and, in some cases, reverse fatty liver disease.
- You do not need to make huge changes overnight.
- Small changes can add up.



Important: This does not mean that everyone with fatty liver disease needs to lose weight. Speak to a healthcare professional for personalised advice

What's in Season

Here is a list of fruit and veg in season over Autumn

Fruit

Sept: Blackberries, Damsons, Pears, Plums, Raspberries, Rhubarb, Strawberries

October: Apples, Blackberries, Elderberries, Pears

Nov: Apples, Cranberries, Elderberries, Pears

Vegetables

Sept and Oct: Aubergine, Beetroot, Broccoli, Brussels Sprouts, Butternut Squash, Carrots, Cauliflower, Celery, Courgettes, Chicory, Chillies, Cucumber, Garlic, Kale, Kohlrabi, Leeks, Lettuce, Mangetout, Marrow, Onions, Parsnips, Peas, Peppers, Potatoes, Pumpkin, Radishes, Rocket, Runner Beans, Samphire, Sorrel, Spinach, Spring Greens, Spring Onions, Summer Squash, Sweetcorn, Swiss Chard, Tomatoes, Turnips, Watercress, Wild Mushrooms.

In Oct we lose Courgettes and Mangetout but we add Celeriac, Winter Squash, and Swede.

Nov: Beetroot, Brussels Sprouts, Butternut Squash, Cabbage, Carrots, Cauliflower, Celeriac, Celery, Chestnuts, Chicory, Jerusalem Artichokes, Kale, Leeks, Onions, Parsnips, Potatoes, Pumpkin, Swede, Swiss Chard, Turnips, Watercress, Wild Mushrooms, Winter Squash



Veggie Fritters

An easy vegetable fritter recipe for all the family and you can add any grated vegetables you like. From BBC Good Food:

Ingredients:

Fritters:

- 1 large free-range egg
- 50g/1¾oz self-raising flour
- 150g/5½oz butternut squash, grated
- 198g tin sweetcorn, drained
- 2 spring onions, trimmed and finely sliced
- 4 tbsp oil, olive, sunflower or vegetable
- salt and freshly ground black pepper

Lemony Cucumber Dip:

- ⅓ cucumber, grated
- 6 tbsp yoghurt
- ½ garlic clove, crushed
- ½ lemon, finely grated zest only (optional)



**COOK: 10 – 30 MINS, SERVE: MAKES 5 FRITTERS,
DIETARY: NUT-FREE, PREGNANCY FRIENDLY,
VEGETARIAN**

Method

1. To make the fritters, break the egg into a bowl. Whisk the egg and flour together in a large bowl. Add the butternut squash, sweetcorn and spring onions. Season to taste with salt and pepper.
2. Heat the oil in a large, non-stick frying pan. Gently drop 1–2 large spoonfuls of the batter into the pan and spread with the back of the spoon. Spoon in four more fritters, leaving a 2–3cm/¾–1¼in gap between them. If your frying pan is smaller, fry in batches to avoid the fritters merging.
3. Cook over a medium heat for 3 minutes on each side, or until crisp and golden-brown. Transfer to a plate lined with kitchen paper. Serve with the lemony cucumber dip.
4. To make the lemony cucumber dip, combine all the ingredients in a small bowl.

Try making these in your air fryer to reduce the oil and keep the crunch

They can be frozen for quick lunches and dinners

Delicious as they are or add a salad and/or a protein for variety

There are lots of veg in season over Autumn so mix it up and try something new

Frozen vegetables thawed and leftover cooked vegetables can be cut into small pieces before mixing with the batter.

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