Diet and Interstitial Cystitis (IC):
Recommended foods for IC include those rich in omega 3 fatty acids such as fish (especially salmon), fish oil and flaxseed oil.

Foods to avoid:
While it is unclear as to the exact mechanism by which foods may make IC worse, about half of patients with IC can identify foods and fluids that will worsen their symptoms. The most commonly implicated foods and beverages are coffee, chocolate, alcohol, carbonated drinks, citrus fruits, and tomato-based products. Arylalkylamine-containing foods (tryptophan, tyrosine, tyramine, and phenylalanine) have also been implicated in making IC symptoms worse. Arylalkylamine-containing foods include bananas, alcohol (including beer and wine), aged cheeses, mayonnaise, artificial sweeteners (including aspartame), onions, raisins, sour cream, and yogurt.

Other foods the Interstitial Cystitis Association lists as possibly causing bladder irritation include: certain meats (cured, processed, smoked, canned, aged, or that contain nitrates), fava and lima beans, nuts (except almonds, cashews, and pine nuts), most fruits (except blueberries, honeydew melon, and pears), rye bread, seasonings with MSG, sourdough bread, soy, tea, tofu and tomatoes.

"Elimination" Diet
In order to identify foods that make your IC symptoms worse, it is helpful to implement a diet for 2–3 months that eliminates the suspected foods and fluids that exacerbate IC symptoms and then adding them back one at a time to watch for worsening that will confirm the suspected food as one to be avoided. Studies show that the intake of foods and fluids that exacerbate IC symptoms usually increased painful bladder symptoms within 2–4 hours of ingestion. During the elimination diet it is helpful to also exclude acidic foods which are often implicated in making IC worse. Also, a steady intake of water helps to dilute urine and reduce constipation.

CAM Supplements helpful for Interstitial Cystitis (IC):
Urinary alkalinization with baking soda or potassium citrate has been an effective treatment for many IC patients.

Nutraceuticals, or chemicals that induce bodily physiological changes, have been popularized in managing IC patients. For example, calcium glycerophosphate reduces titratable acids in foods and has been effective in decreasing the worsening of IC symptoms when bladder irritants are ingested. Additional nutraceuticals sometimes used by IC patients include L-arginine, mucopolysaccharides (hyaluronic acid, chondroitin sulfate (in bladder), and aloe vera, bioflavinoids (quercitin), and Chinese herbs. One herbal remedy thought to possibly be helpful in IC is marshmallow root tea. Vitamin D has also been recommended.

Bioflavinoids are naturally occurring compounds found in plants and fruits that sometimes offer health benefits. The bioflavinoid quercitin inhibits histamine release from mast cells in the bladder, a mechanism that is thought to be related to the symptoms of IC. Quercitin also has anti-inflammatory and anti-oxidant properties. Quercitin is rich in seeds, olive oil, tea (also citrus fruits and red wine though these may need to be avoided with IC).

Antioxidants
Antioxidants besides quercitin that have been recommended by some authorities include Vitamin E, CoQ10 and superoxide dismutase (SOD) although definitive research supportive of their benefits is lacking.

L-Arginine (Dose: 1500mg/day)
L-Arginine has been shown to reduce the pain and urinary frequency associated with IC. Improvement of symptoms may take 2-4 weeks of treatment.

Quercitin (Dose: 500mg twice a day)
Quercitin has been shown to reduce the pain and urinary frequency associated with IC in more than half of people studied. Improvement of symptoms may take 4 weeks of treatment.