

What is constipation?

Constipation is defined as having a bowel movement less than 3 times per week. It is usually associated with hard stools or difficulty passing stools. You may have pain while passing stools or may be unable to have a bowel movement after straining or pushing for more than 10 minutes. Constipation is a common problem regardless of sex, age or race.

What is the criteria for having constipation?

You must have 2 or more of the following:

- The passage of hard, lumpy, pellet-like stools
- The need to strain when having a bowel movement
- A sense of incomplete emptying of the rectum with a bowel movement
- Loose stools are rarely present without the use of enemas, suppositories, oral laxatives
- Manual maneuvers such as digital stimulation or pelvic floor support are needed for regular bowel movements
- Fewer than 3 bowel movements per week
- Insufficient criteria for irritable bowel syndrome

What are the different types of constipation?

There are 4 types of constipation:

- Normal transit constipation- Waste moves through the body normally but is still difficult to pass
- Slow transit constipation- Unusually slow passage of waste through the large intestine caused by a problem with the nerves that control it
- Dyssynergic constipation- The nerves and muscles on the pelvic floor abnormally contract and relax preventing stool from passing.

• Slow transit constipation with dyssynergia

What are the causes?

There are many reasons for the development of constipation. These include:

- dietary and lifestyle habits
- medications
- behavioral issues
- idiopathic (no known cause)

Most commonly constipation occurs when waste or stool moves too slowly through the digestive tract, causing it to become hard and dry. For some people constipation may be a symptom associated with a medical condition including structural, metabolic, muscle, nerve or functional disorders. For other people there may be more than one underlying cause for their constipation.

Common causes of constipation:

- Lack of fiber in the diet
- Lack of water and other fluids (dehydration)
- Lack of physical activity (especially in elderly)
- Medications
- Changes in life or routine such as pregnancy, aging, and travel
- Ignoring the urge to have a bowel movement
- Irritable bowel syndrome (IBS)
- Mechanical blockage of the colon or rectum
- Structural blockage of the rectum or colon
- Medical conditions

Lack of adequate dietary fiber

People with normal transit constipation with proper functioning muscles are less likely to become constipated if they eat a fiber-rich diet. Fiber is the best bowel regulator. It bulks up loose stool and softens hard stool. Both soluble and insoluble fibers are important for a balanced diet.

- Soluble fiber dissolves easily and takes on a soft, gel-like texture in the in the intestines. It helps with digestion and has the added benefit of decreasing cholesterol.
- **Insoluble fiber** passes through the intestines almost unchanged leaving the stool bulky.

Americans eat an average of 5-14 grams of fiber daily. This is short of the 25-35 grams recommended by the American Dietetic Association (ADA). A reason for this is because Americans eat many refined and processed foods which have had the natural fiber removed.

Older adults may have the most difficulty increasing fiber intake. Many older adults lose interest in eating or choose foods that are quick to make or buy. These fast foods and prepared foods are typically low in fiber and high in fat. Also, older people may have difficulties with chewing or swallowing causing them to eat soft foods that are processed and therefore low in fiber.

Dehydration

Low fluid intake can contribute to constipation. Drinking more decaffeinated fluids can help your constipation because it is believed to add fluid to the colon and soften stools. This creates more regular bowel movements and makes them easier to pass. It is important to drink fluids that hydrate the body, especially in the heat or when consuming large quantities of caffeine-containing or alcoholic beverages.

Lack of physical activity

Increased physical activity is more likely to stimulate bowel movements and improve the symptoms of constipation. A lack of physical activity can lead to constipation. For example, constipation often occurs after an accident or during an illness when one must stay in bed and cannot exercise. Lack of physical activity is thought to be one of the reasons constipation is more common in older people.

Medications

Many medications can cause constipation including prescription or nonprescription (over-the-counter) drugs. The list below includes common prescription and over-the-counter drugs that may cause constipation. Be aware that there are many other drugs not listed below that may cause constipation. Consult your doctor if you notice the development of constipation with the use of a medication.

Prescriptions drugs

- Pain medications, particularly those containing opiates
- Muscle relaxants
- Antispasmodics
- Antidepressants
- Antiparkinson drugs
- Blood pressure medications (beta blockers and calcium channel blockers)
- Diuretics
- Anticonvulsants
- Antipsychotic drugs
- Antihistamines

Nonprescription drugs

- Antacids that contain aluminum and calcium
- Iron supplements
- Antihistamines
- Antidiarrheal agents

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- Calcium supplements
- Nonsteroidal anti-inflammatory agents

Changes in life or routine

During pregnancy, women may be constipated because of hormonal changes or because the uterus presses on the intestine. Aging may also affect bowel regularity possibly due to slowing metabolism, slower intestinal movements or decreased muscle tone and strength. Finally, people may become constipated when traveling because their normal diet and daily routine are disrupted.

Ignoring the urge to have a bowel movement

People who ignore the urge to have a bowel movement may eventually stop feeling the need to have one, which can lead to constipation. Some people delay having a bowel movement because they do not find it convenient to use toilets outside the home. Others ignore the urge because of emotional stress or because they are simply too busy.

Irritable Bowel Syndrome (IBS)

IBS is a common chronic disorder causing a change in bowel habits as well as abdominal (stomach area) discomfort. IBS can include constipation, diarrhea, and a mixed pattern in which the bowels alternate between that of diarrhea and constipation. IBS is referred to as a functional bowel disorder because it is a problem with how your bowels function or work. This may include changes in normal bowel movement, bowel secretion or bowel pain sensation. There are specific therapies for IBS that may also help the related symptoms of constipation.

Obstruction of the colon or rectum

There are a number of disorders that may compress, squeeze or narrow the intestines. This may result in a physical barrier (obstruction) against the easy Michigan Bowel Control Program Constipation

passage of the stool through the bowels. These conditions may result in constipation as a side effect.

Causes of mechanical obstruction:

- Colon cancer
- Narrowing of the colon, rectum or anus
- Adhesions (scar tissue from previous surgery)
- Outside compression of the colon
- Widening of the colon (Megacolon-Hirschsprung's disease)
- Pelvic floor dyssynergia (The nerves and muscles on the pelvic floor abnormally contract and relax preventing stool from passing.

Systemic diseases or conditions

A number of systemic diseases and conditions may also cause constipation. Systemic diseases affect the entire body rather than one organ or body part. These include neurologic disorders (traumatic brain injuries, strokes), myopathies (Multiple Sclerosis, Cerebral Palsy), metabolic and endocrine disorders (diabetes, thyroid problems). These disorders can slow the movement of stool through the colon, rectum, or anus.

How can I get help for my constipation?

You should seek help from a gastroenterologist if the above-mentioned lifestyle, dietary or behavioral changes do not relieve the constipation.

You should see a doctor right away if you have:

- blood in the stool
- rectal bleeding
- abdominal pain
- distended/ swollen abdomen
- painful bowel movements

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- unexplained weight loss
- constipation lasting longer than three weeks
- associated nausea or vomiting

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