Understanding & Alleviating Constipation

Living (Well!) with Gastroparesis Program
Warm-Up Class
Please Remember...

The information presented is for educational purposes only and is in no way intended as medical advice. Consult your doctor or other qualified healthcare provider with any questions or concerns about your condition.
What is Constipation?

- Less than three bowel movements per week
- Excessive straining
- Hard, dry stools
- Feeling on incomplete evacuation
- Regularity varies from person to person. The most important thing is to notice changes in your bowel habits – something that is not normal for you.
- Call your doctor if you have new or worsening constipation along with intense abdominal pain, blood in your stool, rectal pain, or thin, pencil-like stools
**Common Causes of Constipation**

- Insufficient fluid Intake/dehydration
- Poor diet: processed food, lots of dairy, not enough fruits/veggies, too little healthy fat
- Lack of physical activity
- Depression
- Stress
- Medication (including antispasmodics, antiemetics like Zofran, narcotic pain meds, aluminum or calcium based antacids, iron supplements, antidepressants, allergy meds)
- Underlying condition: hypothyroidism, lupus, scleroderma
- Diffuse slow motility disorder: CIP or colonic inertia
- Pelvic Floor Dysfunction
Chronic constipation...

* is uncomfortable
* increases symptoms of nausea, bloating, and fullness
* further delays gastric emptying
* promotes bacterial overgrowth
Testing for Causes of Constipation

Usually not necessary, but may include:

* Barium enema X-ray
* X-ray of the anorectal area (defecography)
* Sigmoidoscopy or colonoscopy
* Anorectal manometry
* Sitz Marker Study
* Full GI transit study (scintigraphy)
Steps to Alleviate Constipation

* **Fluids:** drink more water and other non-caffeinated beverages (especially if you increase fiber!)
* **Diet:** reduce processed foods, reduce dairy products, work toward including more GP-friendly fruits and veggies in your diet (learn how in classes 5, 6, 7 and 8!); watch FODMAPs
* **Supplementation:** Magnesium 200-1,000 mg per day
* **Activity:** aim for *at least* 20-30 minutes of mild to moderate exercise daily (walking, biking, etc.)
* **Routine:** make it a habit and don’t ignore the urge
* **Medication:** review any constipation-causing meds with doctor and talk about alternatives
OTC Laxatives

- **Stool softeners (Colace)** moisten and soften the stool
- **Lubricants (Mineral Oil)** enable stool to move through your colon more easily
- **Osmotics (Miralax; Milk of Magnesia):** draw water into the colon for easier passage of stool; distend the bowel with fluid
- **Oral Stimulants (Dulcolax; Senna)** cause rhythmic contractions in the intestines
- **Rectal Stimulants (Dulcolax; Senna)** cause rhythmic contractions in the intestines

*Note: Fiber supplements like Metamucil are not GP-friendly.*
Always tell your doctor about any laxatives you are taking.

Oral laxatives may interfere with absorption of some medications (including blood thinners, antibiotics such as tetracycline, and certain heart and bone medication), as well as nutrients. Rectal laxatives do not have this effect.

All laxatives have potential side effects, such as belching, bloating, cramping, diarrhea, nausea, and increased thirst.

Prolonged use of some laxatives can lead to an electrolyte imbalance. Electrolytes, which include calcium, chloride, potassium, magnesium and sodium, regulate muscle contraction, heart rhythm, nerve function, fluid balance and other body functions.
Prescription Medication

- **Amitiza** (currently available in the US)
- **Linaclotide** (available in US as of late 2012)
- **Prucalopride** (available in UK)
Often work as well as medication, typically with no side effects when done by a qualified practitioner. (see class 4)

- Acupuncture
- Acupressure
- Abdominal massage
- Reflexology
- Biofeedback
- Hypnosis
Emerging interest in functional GI disorders, including gastroparesis and chronic constipation

- Bacteria may slow down the lower gut, causing constipation (or alternating bowel extremes)

- Often a factor in constipation that develops after gastroparesis, especially if diet and lifestyle factors don’t seem to help

- Usually accompanied by bloating, gas, pain, belching, “noisy” stomach