

Mobility

Exercise promotes regular bowel habit, so it can be helpful to be as active as you can manage.

Laxatives

Laxatives can be classified into two broad categories; those that act to predominantly soften faecal matter and those that stimulate bowel movement.

There is a lack of evidence to support the use of any one laxative over another and so the choice of laxative is guided by individual preference, circumstances and cost. For example, some people prefer liquid laxatives to tablets, and some laxatives are more expensive than others.

The combination of a softening and a stimulating laxative is generally recommended to best manage constipation. Doses of laxatives should be gradually increased daily or every second day until the constipation resolves.

Is prevention better than cure?

Yes! It is much easier to prevent constipation than to treat it once established. If you are taking painkillers such as morphine, this is particularly important and it is almost always necessary to take a laxative regularly if you are also prescribed morphine.



PALLIATIVE
CARE

Relief from Constipation

National Clinical Programme for Palliative Care



For more information on the
National Clinical Programme for Palliative Care, go to
www.hse.ie/palliativecareprogramme

What is constipation?

Everyone is different and therefore bowel habits vary. Constipation is a condition in which bowel movements occur less often than usual or consist of hard, dry stools that are painful or difficult to pass.

How common is it?

Unfortunately, people with serious illness often become constipated. A number of things may put you at increased risk of becoming constipated including:

- inactivity
- reduced mobility
- low mood
- tiredness.

When a person loses weight, they often lose condition and have less strength to move their bowels.

Medications can also cause constipation.

These include:

- pain-killers
- iron tablets
- water tablets (diuretics)
- others.

Why is it important to recognise and treat constipation?

A person with constipation can feel very unwell. Some people are at risk of developing complications as a result of constipation, for example, vomiting or haemorrhoids (piles).

What symptoms might a person with constipation experience?

A person with constipation may:

- lose their appetite
- feel nauseated or sick
- vomit
- develop stomach pain
- feel full or bloated.

Sometimes a person with constipation can develop 'overflow diarrhoea'. This is a condition where the bowel is blocked by hard, impacted faeces, but some liquids manage to seep past the blockage.

In severe cases of constipation, a person may develop a bowel obstruction. A bowel obstruction is a blockage in the bowel. There are a number of different ways of managing a bowel obstruction and your doctor will help you decide which is the best approach for you if this should occur.

What examinations or tests might I need to diagnose or treat constipation?

In most cases, a nurse or doctor will be able to diagnose and treat constipation by asking you a number of questions and carrying out a physical examination of your abdomen.

If it has been more than three days since you last passed a bowel motion or if you have a sensation of not completely emptying your bowel, then a nurse or doctor may perform a rectal examination. A rectal examination is a type of physical examination during which a doctor or nurse inserts a finger into your rectum (back passage) to feel for abnormalities. This examination only takes a few minutes and is not usually painful.

Occasionally, it may be necessary to carry out an x-ray of the abdomen.

How is constipation treated?

A number of approaches can be helpful in treating constipation.

Toilet environment

Try to make sure that when you visit the toilet, you can sit comfortably and that you have enough time and privacy so that you can relax. Naturally, people experience the strongest urge to pass a bowel motion in the morning, and so establishing a pattern where you use the toilet 20 minutes after breakfast can be helpful.

Fluid and fibre intake

If possible:

- Eat regular meals
 - Drink plenty of fluids
 - Include a high fibre food at each meal.
- How to add more fibre to your diet:**
- Choose wholemeal or wholegrain breads, wholegrain breakfast cereals, brown rice and whole wheat pasta.
 - Eat more vegetables. Include pulse vegetables such as beans, peas and lentils in soups, stews, casseroles and salads.
 - Aim to have 2-3 pieces of fruit every day.
 - Drink prune juice or other fruit juices.

It can take several weeks for increased fibre to have an effect and it is equally important that you drink plenty of fluids during the day to help the fibre to work. Increasing intake of fibre may not be advised for some people with certain conditions or if you have a poor appetite. Your doctor, nurse or dietitian will be able to give you dietary advice on the right approach for you.