### Constipation



Self-study course

#### Course objectives:

#### At the end of this course you will be able to:

- 1. Define the term constipation
- 2. Explain three reasons why older adults are at greater risk for constipation than younger adults
- 3. List three products or medications used to treat constipation
- 4. List four natural preventive steps for constipation
- 5. List four warning signs of constipation

## What is the normal process of bowel elimination?

When food enters the stomach, it is mixed and churned into a liquid that contains particles of nutrients which are absorbed into the blood stream through the lining of the small intestines. Small muscles in the intestinal tract contract in waves, called peristalsis, and move the liquid from the stomach to the small intestine, where the nutrients are absorbed. Gravity is also important in this process.

Peristalsis further moves the now semi-solid material into the large intestines or colon where water is absorbed, leaving a brown residue that we recognize as stool or feces. When the final portion of the large intestine, the rectum, becomes full of stool, large peristalic waves stimulate nerves, creating the urge to defecate. Once a bowel movement occurs, the urge to defecate ceases until this process is repeated. If a bowel movement does not occur and the urge to defecate passes, more stool will fill the rectal vault, forming a hard ball that is then more difficult to evacuate.

### What is constipation?

A bowel movement is nature's way of eliminating waste from our bodies. Everyone has a bowel elimination pattern that is unique to them. What may be a normal pattern for one person may be abnormal for another.

Constipation occurs when stool remains in the intestinal tract too long, becomes compacted or hardened and is difficult and/or painful to evacuate or expel out of the rectum. A normal stool should be soft, brown and formed. Constipation may be further defined as:

- Hardness of stool. If a person can only pass small hard balls of stool (often referred to as "rabbit pellets"), they are constipated.
- Difficulty in evacuating stool out of the rectum. If a person needs to push hard and is straining too have a bowel movement, they are constipated.
- Infrequent bowel movements. Usually counted as no bowel movement for 3 days or longer.
- Watery or liquid stools may also indicate constipation! This is due to liquid stool being expelled around a ball of hardened stool that is blocking the intestinal tract.

# Why are older adults at greater risk for constipation?

Constipation is a common occurrence in young children and older adults. In fact, it occurs frequently in persons of all ages. However, many older adults suffer from constipation on a daily basis and can be at risk for becoming seriously ill and may need to be hospitalized. Constipation is increased in older adults due to:

- Absent or low tone in muscles (mainly abdominal) that assist in bowel movements.
- Immobility and the inability to walk. Gravity and movement helps move stool through the digestive tract.
- Taking medications that have the side effect of causing constipation. Prescription pain medications can be especially constipating.

- Swallowing and chewing problems may lead to a lack of fiber in the diet.
- Lack of opportunity or an interruption of an established bathroom routine. After eating a meal or drinking a warm beverage in the morning, many people have the urge to defecate. If the opportunity to use the toilet is denied or delayed, the urge will lessen and cease.
- Dementia or decreased alertness may cause older adults to ignore the urge to defecate. Persons with dementia are also often on diets that are low in fiber and fluids.
- Change in routine, a new living environment or a change in health status may cause an older adult to be uncomfortable using a bedside commode or bedpan.
- General pain and discomfort may make it difficult for many older adults to make it to the bathroom quickly or to sit comfortably on a commode or bedpan.

### Daily bowel hygiene

Simple life style changes may often lessen the risk of constipation and keep older adults regular. The following are some simple but important preventive steps:

- Increasing dietary fiber and fluid. Whole grain baked goods/cereals and prune juice are simple ways to increase fiber in a diet. When increasing dietary fiber, always include plenty of fluids.
- Increasing physical activity and exercise. Mobility and gravity increases peristalsis.
- Position in a sitting position or as upright as tolerated when a commode or bedpan is used.

• Providing frequent opportunities for routine toileting and privacy. Also provide bathroom aids, such as grab bars, a raised toilet seat and a foot stool.

### Bowel medications and products

In addition to the above, older adults may need bowel medications or products that assist them in having a bowel movement. There are many products that can be purchased over the counter, and some medications that need a physician's prescription.

It is important that the package labels and physician's instructions are followed carefully when using these products. Overuse or improper use of bowel products and medications can lead to diarrhea and the inability to have a normal bowel movement.

The following table lists types of products/medications and examples of each.

Types of Product/Meds	Example		
Fiber – increases the bulk of the feces	Metamucil, Citrucel, Fiber Con Tabs,		
	Prune Pudding		
Stool Softners – add water to the feces	Dulcolax, Colace, Ex-Lax		
Lubricant – adds oil to the feces	Mineral Oil		
Stimulants – increase peristalsis	Milk of Magnesia, Bisacodyl		
Osmotics – add water to the feces	Lactulose, Go-Lytely, Magnesium		
	Citrate		
Suppositories and Enemas – stimulate	Glycerin, BisacodylFleets, Tap Water, Oil		
the lower intestine	Retention		

## Signs and symptoms that an older adult may be constipated

- Meal refusal or loss of appetite
- Change in bowel pattern, such as numerous trips to the bathroom or staying in the bathroom for long periods
- Straining and pushing while having a bowel movement
- Complaining of pain when having a bowel movement
- Runny liquid stools after several days of no bowel movement or having only small, hard bowel movements
- Rectal digging (the person may be attempting to self-treat)

### Bowel emergencies

Every year in Oregon, older adults die unnecessarily from bowel impactions. Caregivers can prevent this fatal outcome by watching for the following in persons who have a history, or current problems, with constipation:

- Vomiting material that smells like feces
- A very hard, protruding abdomen
- Severe abdominal pain

Call 911 or follow your program's emergency procedures if you encounter these situations.

## What to do if you believe a person is constipated?

- Be proactive and attempt to prevent constipation by providing a high fiber diet, plenty of fluids, exercise and an opportunity for using the bathroom.
- Track bowel movements to establish a pattern of the person's bowel movements so you can know if they are constipated and can help. Nurses and physicians will be more responsive and helpful if you can show them the changes and gaps in the person's bowel pattern.
- If there are no PRN bowel products/medications available or ordered, call the client's nurse or physician. If after giving a PRN product/medication and no results occur within the time set forth on the package label or physician's instruction, call the nurse or physician back for further instructions. Ask the nurse, physician or a pharmacist if the bowel medications/products will interfere with the person's regular medications and if so want can be done about it.

#### Documentation

Information on the person's level of independence, normal bowel routine and any dietary or medication interventions for constipation should be documented in the Resident's Care Plan. If the person moves to another setting, this information should accompany them, as it can be easily lost in the move.

A bowel movement and fluid intake tracking record should also be considered if the person is at risk for constipation. List "Constipation Risk" under the medical concerns portion of the plan.



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