



## **Constipation**

Constipation is passage of small amounts of hard, dry bowel movements, usually fewer than three times a week. People who are constipated may find it difficult and painful to have a bowel movement. Other symptoms of constipation include feeling bloated, uncomfortable, and sluggish.

Many people think they are constipated when, in fact, their bowel movements are regular. For example, some people believe they are constipated, or irregular, if they do not have a bowel movement every day. However, there is no right number of daily or weekly bowel movements. Normal may be three times a day or three times a week depending on the person. Also, some people naturally have firmer stools than others.

At one time or another, almost everyone gets constipated. Poor diet and lack of exercise are usually the causes. In most cases, constipation is temporary and not serious. Understanding its causes, prevention, and treatment will help most people find relief.

### **What causes constipation?**

To understand constipation, it helps to know how the colon (large intestine) works. As food moves through the colon, it absorbs water while forming waste products, or stool. Muscle contractions in the colon push the stool toward the rectum. By the time stool reaches the rectum, it is solid because most of the water has been absorbed.

The hard and dry stools of constipation occur when the colon absorbs too much water or if the colon's muscle contractions are slow or sluggish, causing the stool to move through the colon too slowly. Common causes of constipation are

- \* not enough fiber in the diet
- \* not enough liquids
- \* lack of exercise
- \* medications
- \* irritable bowel syndrome
- \* changes in life or routine such as pregnancy, older age, and travel
- \* abuse of laxatives
- \* ignoring the urge to have a bowel movement
- \* stroke
- \* problems with the colon and rectum
- \* problems with intestinal function (chronic idiopathic constipation)

### **Not Enough Fiber in the Diet**

The most common cause of constipation is a diet low in fiber (vegetables, fruits, and whole grains) and high in fats (cheese, eggs, and meats). People who eat plenty of high-fiber foods are less likely to become constipated.

Fiber is the part of fruits, vegetables, and grains that the body cannot digest. The bulk and soft texture of fiber help prevent hard, dry stools.

The American Dietetic Association recommends eating 20 to 35 grams of fiber daily. Most Americans eat less than half of this recommended amount. Both children and adults eat too many refined and processed foods from which the natural fiber has been removed.

Older adults may lose interest in eating and choose convenience foods low in fiber. In addition, difficulties with chewing or swallowing may force older people to eat soft foods that are processed and low in fiber.





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#### **Not Enough Liquids**

Liquids like water and juice add fluid to the colon and bulk to stools, making bowel movements softer and easier to pass. People who have problems with constipation should drink enough of these liquids every day, about eight 8-ounce glasses. Liquids that contain caffeine, like coffee and cola drinks, and alcohol have a dehydrating effect.

#### **Lack of Exercise**

Lack of exercise can lead to constipation. Constipation often occurs after an accident or during an illness when one must stay in bed and cannot exercise.

#### **Medications**

Pain medications (especially narcotics), antacids that contain aluminum, some blood pressure medications (calcium channel blockers), antispasmodics, antidepressants, iron supplements, diuretics, and anticonvulsants can slow passage of bowel movements.

#### **Irritable Bowel Syndrome (IBS)**

Some people with IBS have spasms in the colon that affect bowel movements. Constipation and diarrhea often alternate, and abdominal cramping, gassiness, and bloating are other common complaints. IBS often worsens with stress, but there is no specific cause or anything unusual that the doctor can see in the colon.

#### **Changes in Life or Routine**

Women may be constipated during pregnancy. Aging may also affect bowel regularity because of slower metabolism. In addition, people often become constipated when traveling because their normal diet and daily routines are disrupted.

#### **Abuse of Laxatives**

Myths about constipation have led to a serious abuse of laxatives. This is common among people who are preoccupied with having a daily bowel movement.

Laxatives or enemas usually are not necessary and can be habit-forming. The colon begins to rely on laxatives to bring on bowel movements. Over time, laxatives or enemas can damage nerve cells in the colon and interfere with the colon's natural ability to contract.

#### **Ignoring the Urge to Have a Bowel Movement**

People who ignore the urge to have a bowel movement may eventually stop feeling the urge, which can lead to constipation. Some people delay having a bowel movement because of emotional stress, rushing, or unwillingness to use toilets outside the home. Children may postpone having a bowel movement because they do not want to interrupt their play.

#### **Specific Diseases**

Diseases that cause constipation include neurological disorders, metabolic and endocrine disorders, and systemic conditions that affect organ systems. These disorders can slow the movement of stool through the colon, rectum, or anus.

#### **Problems with the Colon and Rectum**

Intestinal obstruction, scar tissue (adhesions), diverticulosis, tumors, colorectal stricture, Hirschsprung's disease, or cancer can narrow the intestine and rectum and cause constipation.

#### **Problems with Intestinal Function (Chronic Idiopathic Constipation)**

Some people have chronic constipation that does not respond to standard treatment. This rare condition, known as idiopathic (of unknown origin) chronic constipation may be related to problems with intestinal function. Functional constipation occurs in both children and adults and is most common in women.

#### **What diagnostic tests are used?**

Most people with constipation do not need extensive testing and can be treated with changes in diet and exercise. The tests the doctor performs depend on the duration and severity of the constipation, the person's age, and whether blood in stools, recent changes in bowel movements, or weight loss have occurred.





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### **Medical History**

The doctor may ask a patient to describe his or her constipation, including duration of symptoms, frequency of bowel movements, consistency of stools, presence of blood in the stool, and toilet habits. A record of eating habits, medication, and level of physical activity or exercise will also help the doctor determine the cause of constipation.

The clinical definition of constipation is any two of the following symptoms for at least 12 weeks (not necessarily consecutive) in the previous 12 months:

- straining during bowel movements
- lumpy or hard stool
- sensation of incomplete evacuation
- sensation of anorectal blockage/obstruction
- fewer than three bowel movements per week

### **Physical Examination**

A physical exam may include a rectal exam with a gloved, lubricated finger to evaluate the tone of the muscle that closes off the anus (anal sphincter) and to detect tenderness, obstruction, or blood. In some cases, blood and thyroid tests may be necessary to look for systemic disorders.

Extensive testing usually is reserved for people with severe symptoms, for those with sudden changes in number and consistency of bowel movements or blood in the stool, and for older adults. Additional tests that may be used to evaluate constipation include

- colorectal transit study
- anorectal function tests
- barium enema x-ray
- sigmoidoscopy or colonoscopy

### **How is constipation treated?**

Although treatment depends on the cause, severity, and duration, in most cases dietary and lifestyle changes will help relieve symptoms of constipation and help prevent it.

### **Diet**

A diet with enough fiber (20 to 35 grams each day) helps form soft, bulky stool. A doctor or dietitian can help plan an appropriate diet. High-fiber foods include beans, whole grains and bran cereals, fresh fruits, and vegetables such as asparagus, brussels sprouts, cabbage, and carrots. For people prone to constipation, limiting foods that have little or no fiber, such as ice cream, cheese, meat, and processed foods, is also important.

### **Lifestyle Changes**

Other changes that can help treat and prevent constipation include drinking enough water and other liquids such as fruit and vegetable juices and clear soups, engaging in daily exercise, and reserving enough time to have a bowel movement. In addition, the urge to have a bowel movement should not be ignored.

### **Laxatives**

Most people who are mildly constipated do not need laxatives. However, for those who have made diet and lifestyle changes and are still constipated, doctors may recommend laxatives or enemas for a limited time. These treatments can help retrain a chronically sluggish bowel. For children, short-term treatment with laxatives, along with retraining to establish regular bowel habits, also helps prevent constipation.

A doctor should determine when a patient needs a laxative and which form is best. Laxatives taken by mouth are available in liquid, tablet, gum, powder, and granule forms. They work in various ways.

People who are dependent on laxatives need to slowly stop using them. A doctor can assist in this process. In most people, this restores the colon's natural ability to contract.





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### Other Treatments

Treatment may be directed at a specific cause. For example, the doctor may recommend discontinuing medication or performing surgery to correct an anorectal problem such as rectal prolapse.

People with chronic constipation caused by anorectal dysfunction can use biofeedback to retrain the muscles that control release of bowel movements. Biofeedback involves using a sensor to monitor muscle activity, allowing for an accurate assessment of body functions. A health care professional uses this information to help the patient learn how to use these muscles.

Surgical removal of the colon may be an option for people with severe symptoms caused by colonic inertia. However, the benefits of this surgery must be weighed against possible complications, which include abdominal pain and diarrhea.

### Can constipation be serious?

Sometimes constipation can lead to complications including hemorrhoids or anal fissures (tears in the skin around the anus). As a result, rectal bleeding may occur, appearing as bright red streaks on the surface of the stool. Treatment for hemorrhoids may include warm tub baths, ice packs, and application of a special cream to the affected area. Treatment for anal fissure may include stretching the sphincter muscle or surgical removal of tissue or skin in the affected area.

Sometimes straining causes a small amount of intestinal lining to push out from the anal opening. This condition, known as rectal prolapse, may lead to secretion of mucus from the anus. Usually eliminating the cause of the prolapse, such as straining or coughing, is the only treatment necessary. Severe or chronic prolapse requires surgery. Constipation may also cause hard stool to pack the intestine and rectum so tightly that the normal pushing action of the colon is not enough to expel the stool. This condition, called fecal impaction, occurs most often in children and older adults. An impaction can be softened with mineral oil taken by mouth and by an enema. After softening the impaction, the doctor may break up and remove part of the hardened stool by inserting one or two fingers into the anus.

### Points to Remember

- Constipation affects almost everyone at one time or another.
- Many people think they are constipated when, in fact, their bowel movements are regular.
- The most common causes of constipation are poor diet and lack of exercise.
- Additional causes of constipation include medications, irritable bowel syndrome, abuse of laxatives, and specific diseases.
- A medical history and physical examination may be the only diagnostic tests needed before the doctor suggests treatment.
- In most cases, following these simple tips will help relieve symptoms and prevent recurrence of constipation:
- Eat a well-balanced, high-fiber diet that includes beans, bran, whole grains, fresh fruits, and vegetables.
- Drink plenty of liquids.
- Exercise regularly.
- Set aside time after breakfast or dinner for undisturbed visits to the toilet.
- Do not ignore the urge to have a bowel movement.
- Understand that normal bowel habits vary.
- Whenever a significant or prolonged change in bowel habits occurs, check with a doctor.
- Most people with mild constipation do not need laxatives. However, doctors may recommend laxatives for a limited time for people with chronic constipation.

### For More Information

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