



Constipation

Constipation can happen to anyone at any time. However, it is more common if you have reduced mobility, neurological health problems, irritable bowel conditions or you are taking regular analgesia for pain.

This patient infosheet has been given to you by your GP/Health Practitioner because you are at risk of constipation, or you have recently had an episode of constipation, and this will help you to understand why this may have happened and how you can reduce the risk of further episodes.

What is constipation?

Constipation can be divided into two categories:

- difficulty in evacuation/emptying bowel
- slow or delayed transit/movement of stool in bowel

Constipation occurs when you do not pass a bowel movement (poo, stool) regularly resulting in a bowel movement that can hurt because the stools have become hard and dry. Constipation can be defined as:

- opening bowels less than three times weekly
- needing to strain more than one quarter of the time when you go to open bowels
- passing small hard pellets/pebbles more than one quarter of the time when you go to open bowels
- a feeling that you not completed the bowel emptying.

How can you tell if you may be constipated?

- Passing stool less frequently than you normally do
- Having to “strain” while passing stool
- Feeling unable to completely empty your bowel
- Your stools appear dry, hard and lumpy
- Abnormally large stool
- Abnormally small hard stool (pellets/pebbles)
- Stomach cramps or aches
- A feeling of being bloated
- A loss of appetite
- Excessive wind with an unpleasant smell
- You may feel sick if constipation is not treated, as the bowel can become over loaded. This is called faecal impaction and can result in overflow incontinence.

Definition of faecal impaction: When there is no adequate bowel movement for days or weeks a large compacted mass of faeces builds up in the large bowel which cannot be easily passed. Loose liquid stool can leak around the mass, this happens between bowel movements causing soiling of loose stool on clothing (faecal overflow incontinence). Passing a large stool can be painful and distressing. If not treated effectively this could lead to more serious complications including hospital admission.

How to help prevent constipation

Making simple changes to your diet and lifestyle can help treat constipation. You may notice an improvement within a few days, although sometimes it may take longer before your constipation symptoms improve.

Improve your diet

To make your poo softer and easier to pass you could try to:

- increase the fibre in your diet by eating high fibre foods
- drink plenty of fluids and avoid alcohol
- add some wheat bran, oats or linseed to your diet. Prunes can also help.

Make your toilet routine better

- Keep to a regular time and place and give yourself plenty of time to use the toilet.
- Do not delay if you feel the urge to poo.
- To make it easier to poo, try resting your feet on a low stool while going to the toilet. If possible, raise your knees above your hips.

Consider increasing your activity

A daily walk or run can help you poo more regularly.

There are medicines that help you poo more regularly and easily; these are called laxatives. Most laxatives work within three days, but should only be used for a short time.

You can speak to a pharmacist if any diet and lifestyle changes you have made are not helping.

If none of the above helps, then please contact your GP.

Further help and information

If you are experiencing continence issues, contact your GP or Community Nurse.

Further useful information can be found at: www.nhsinform.scot

We are listening - how did we do?

We welcome your feedback, as it helps us evaluate the services we provide. If you would like to tell us about your experience:

- speak to a member of staff
- share your story at: www.careopinion.org.uk
- visit our website: www.wihb.scot.nhs.uk/feedback
- tel. 01851 704704 (ext. 2236), please leave a message on the answering machine if no one is available to answer.

