PATIENT & CAREGIVER EDUCATION

How to Manage Constipation

This information describes the signs and causes of constipation. It also describes ways to prevent and treat constipation.

About constipation

Constipation is a common problem that makes it hard to have bowel movements (poop). You might be constipated if your stool (poop) is:

- Too hard.
- Too small.
- Hard to get out.
- Happening fewer than 3 times a week.

Constipation, hard stools, and straining can make hemorrhoids worse and cause bleeding.

Causes of constipation

Constipation can be caused by many things, such as:

- Medicine, such as:
  - Pain medicine.
  - Chemotherapy (chemo).
  - Anti-nausea medicine.
  - Antidepressants.
  - Anti-seizure medicine.
  - Blood pressure medicine.
  - Allergy medicine.
  - Antacids, such as Tums® or Rolaids®.
  - Dietary supplements (vitamins), such as iron and calcium.
- Medical conditions, such as:
  - Diabetes.
  - Depression.
  - Parkinson's disease.
  - Hypothyroidism. This is when your thyroid gland doesn't make enough hormones.
  - Hypercalcemia. This is when there is too much calcium in your blood.
  - Spinal cord compression. This is pressure on your spinal cord from a tumor or injury.
  - Blockage in your intestines.
  - Irritable bowel syndrome with constipation (IBS-C).
  - Inflammatory bowel disease (IBD), Crohn's disease and ulcerative colitis.

Constipation can also be caused by other things, such as:

- Ignoring the urge to have a bowel movement.
- Not having enough time or privacy to have a bowel movement.
- Being inactive, such as not moving around or walking enough.
- Not drinking enough liquids.
- Not eating enough fiber.
- Old age.

Lifestyle changes to prevent and treat constipation

Please visit www.mskcc.org/pe/constipation-after-surgery to watch this video.

- Go to the bathroom at the same time every day. Your body will get used to going at that time. But if you feel like you need to go, do not put it off.
- Try to use the bathroom 5 to 15 minutes after meals. The reflexes in your large intestine (colon) are strongest after breakfast. This is a good time to go.
- Exercise, if you can. Exercise can help prevent and manage constipation and make it easier to have a bowel movement. For example, walking helps your body move food through your colon.
- Drink 8 to 10 (8-ounce) cups (2 liters) of liquids every day, if you can. Limit liquids with caffeine, such as coffee and soda. Caffeine can pull fluid out of your body. Choose drinks such as:
  - Water
  - Juices, such as prune juice
  - Soups
  - Milkshakes

- Slowly increase the fiber in your diet. Aim to have 25 to 35 grams of fiber per day. If you have an ostomy or recently had bowel surgery, talk to your healthcare provider before changing your diet. Foods high in fiber include:
    - Bran
    - Whole-grain cereals and bread
    - Unpeeled fruits and vegetables
    - Mixed green salads
    - Apricots, figs, and raisins
    - Nuts and beans

  Read *A Guide to High Fiber Foods* (www.mskcc.org/pe/high-fiber-foods) to learn more.

Medicine for constipation

Over-the-counter laxatives or prescription medicine can treat constipation and help you have a bowel movement. Over-the-counter medicine is medicine you get without a prescription. Laxatives are medicines that help you have a bowel movement.

Common over-the-counter laxatives

Below is a list of some common over-the-counter laxatives. Talk with your healthcare provider before taking any of these medicines.

Follow your healthcare provider's instructions or the instructions on the label when taking any of these medicines. Talk with your healthcare provider if these medicines do not help. They may suggest other over-the-counter medicine or recommend prescription medicine.

Stool softeners

Stool softeners increase the amount of water in your stool. This makes the stool softer and easier to pass. They also cause few side effects. Examples include docusate sodium (Colace®).

Follow your healthcare provider's instructions for taking stool softeners. Do not take stool softeners while taking mineral oil.

Osmotic laxatives

Osmotic laxatives use water in your body to soften your stool. This helps ease the stool through your colon so you can have a bowel movement. Examples include such as polyethylene glycol (MiraLAX®).

Osmotic laxatives may cause:

- Nausea (feeling like you're going to throw up)
- Bloating
- Gas

These side effects are not common.

Stimulant laxatives

Stimulant laxatives speed up muscle movement in your colon. This helps you have a bowel movement. Examples include senna (Senokot®).

Stimulant laxatives may cause cramping. They're best to take at bedtime.

Bulk-forming laxatives

Bulk-forming laxatives make a more liquid-like stool that's softer and easier to pass. Examples include:

- Psyllium (Metamucil®, Fiberall®, Perdiem®).
- Polycarbophil (Fibercon®)
- Methylcellulose (Citrucel®)

Take these with 8 ounces of liquid, such as water. Bulk-forming laxatives may cause bloating and gas.

Talk with your healthcare provider before using bulk-forming laxatives if you:

- Cannot get out of bed.
- Can only have a small amount of liquids every day.
- Have strictures or a partial blockage in your intestine. Strictures are sections in your intestine that are narrower than others.
- Are constipated because of pain medicine.

Suppositories and enemas

A suppository is a medicine you put in your anus. Do not use suppositories unless your healthcare provider tells you to.

Enemas

An enema is when liquid is put into your rectum through your anus to cause a bowel movement. Your rectum is the bottom of your colon. Do not use enemas unless your healthcare provider tells you to.

When to call your healthcare provider

Call your healthcare provider if:

- You notice bleeding during bowel movements.
- You have not had a bowel movement for 3 days.
- You have diarrhea (loose or watery bowel movements) after taking any of the constipation medicines listed above. Do not take any medicine to manage diarrhea without talking to your healthcare provider first.
- Your abdomen (belly) feels hard to the touch.
- You have any questions or concerns.

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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