

Constipation

“I have seen his ways, but I will heal him; I will guide him and restore comfort to him...”
Isaiah 57:18

Constipation is the most common complaint that doctors hear regarding the digestive system. Over 2 million people a year see their physician regarding constipation. Some people believe that if they do not have a bowel movement every day, they are constipated. The truth is that everyone is a little different when it comes to **normal** bowel movements. Constipation is not a disease, and for most people it is a temporary and treatable condition.

In the past, a definition of constipation was having three or fewer stools a week. However, criteria has been updated. If you have two or more of the following symptoms, that may point to constipation.

During at least 25% of all bowel movements, experiencing:

- Straining
- A feeling of incomplete emptying
- A sense of blockage
- Use of manual maneuvers to help pass stool
- Hard or lumpy stools
- Fewer than three stools a week

For those who experience two or more of these symptoms, a treatment for constipation may be in order.

There are many, many reasons a person may suffer from constipation. These include medical conditions such as hypothyroidism, pregnancy, irritable bowel syndrome, diabetes, multiple sclerosis, Parkinson's disease, spinal cord injuries, and colon cancer. Medications can contribute to constipation, such as narcotics, iron, certain blood pressure pills, and many others. However, as a rule, the causes are far less frightening and easy to pinpoint. A diet without enough roughage, insufficient fluid intake, and too little exercise can all lead to constipation. Other common causes are milk, changes in life routines (traveling), aging, abuse of laxatives, and dehydration.

Generally, a diagnosis is made based on the symptoms a patient reports to his doctor. The patient may be asked to keep a stool diary, for frequency and character of stools. The doctor will look at any medications, eating habits, and the level of daily activity. He may feel the need to perform a sigmoidoscopy or colonoscopy, which involves placing a flexible tube into the colon to have a look at the colon itself. This is useful when looking for blockages or any irregularities of the colon. A Barium enema is another way to visualize the colon, but is not as precise as a scope.

While constipation is not a life-threatening condition, it is very uncomfortable, and affects every aspect of how well we feel. It can aggravate hemorrhoids, cause a rectal prolapse (when the lining of the rectum slides out of the body), fecal impaction (a hard, immovable mass of stool), or anal fissures (painful tears in the anal canal). These are all conditions that are best avoided.

Treatment involves eating more fiber in the diet. This includes whole grains, beans, fresh fruits and vegetables, and helps the stools to be soft and bulky. Drink plenty of fluids, including water and fruit and vegetable drinks. Get 30 minutes of moderate exercise daily—this will not only help bowel function, but benefits your overall health. Give yourself enough time to have a bowel movement. Don't ignore the urge to defecate. Relax and take the time needed to complete this very important function.

Laxatives can be used on occasion, but are NOT to be used as the only treatment of constipation. Stool softeners can be very helpful, and for very quick help an enema or suppository can be considered. Taking mineral oil will actually “grease” the stool, which allows it to move through the intestines more easily.

Check with your doctor if you believe your symptoms are a possible side effect of any drugs you take. Also, if you have a change in bowel patterns, constipation for more than three weeks, or any other symptoms such as blood in the stool, weight loss, fevers, or weakness.

Try to read your body's signals, and set aside an appropriate time after breakfast or dinner to visit the bathroom. Remember that almost everyone is constipated at one time or another.

For more information, check out:

www.gastro.org

www.digestive.niddk.nih.gov