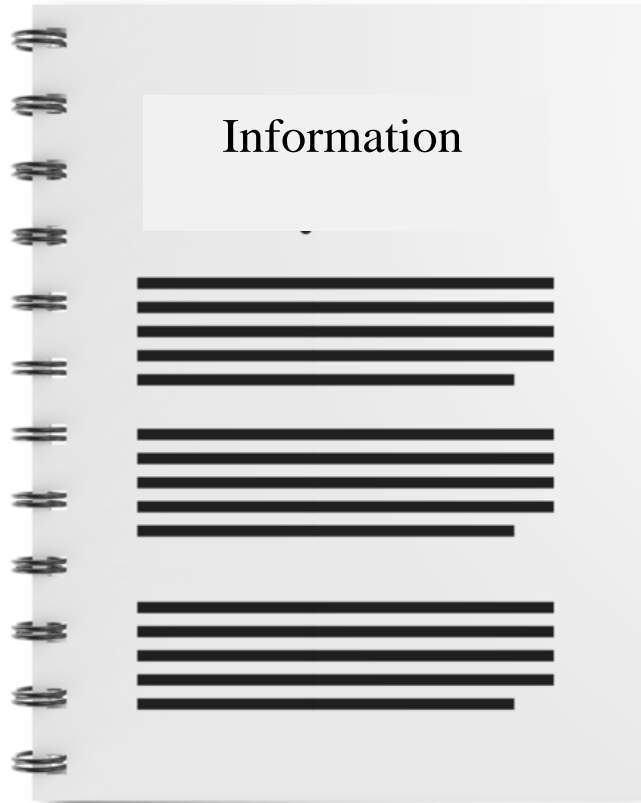




Carer's Information



Managing Constipation

How can we maintain a healthy bowel?

A healthy bowel eliminates / gets rid of waste by producing a firm easily passed stool / poo.

The bowel is part of the digestive system.

The small bowel absorbs nutrients, salts and minerals.

The large bowel absorbs water.



What is a normal bowel habit?

Everyone can be different. Someone may have a bowel movement three times a day, another may have a bowel movement three times a week.

A bowel motion can be between 150g and 200g a day, there should be no pain or discomfort, no bloating or any bleeding. There should be no need to strain. The bowel motion should be easily flushed away, it should not float.

The best way to document bowel motions for people with learning disabilities is to use the Bristol Stool Scale.

What is constipation?

Constipation is a condition in which there is difficulty in emptying the bowels, usually associated with hard faeces / poo.

Who is at risk of constipation?

The elderly / care home residents / dementia.
People with learning disabilities.
People on polypharmacy – more than three or more medications
People with neurological conditions such as Parkinson's disease
People with depression
Children
People who are at end of life
Pregnant women
People who are immobile or who have limited mobility
People who are recovering from surgery
People who have bowel disease such as Crohns, Diverticular disease or cancer.

What are the symptoms of constipation?

Abdominal pain / cramping / bloating
Tiredness / fatigue
Nausea / feeling sick / being sick
Halitosis / bad breath
Incontinence of urine (wee) or faeces (poo)
Retention of urine / not being able to wee / problems with an indwelling catheter



What are the causes of Constipation?

Poor low fibre diet / low fluid intake

Immobility / bed rest

Metabolic disorders such as hypothyroidism, hypercalcaemia

Not going to the toilet when you need to go

The environment - no privacy / having to use a commode or bedpan

Not sitting correctly on the toilet / poor position

Lack of time / being rushed

Changes in routine / working nights / travelling

Medication



Diarrhoea

Diarrhoea is a condition in which faeces (poo) comes from the bowels in liquid form.

What are the causes of diarrhoea?

Diet

Infection

Medication

Irritable Bowel Syndrome

Overuse of laxatives

Having surgery

Being impacted of faeces (poo) constipation.



Managing Constipation

Consult your GP or health professional
Person Centred Assessment
Review persons / service user's diet and fluids
Review persons dietary fibre
Review of medication
Use of abdominal massage
Toilet position
Go to the toilet when "call to poo" or need to pass faeces/poo.
Take Laxatives as prescribed
Medical intervention such as digital stimulation



Laxatives

Take advice from your health care professional or pharmacist.
If you have been taking laxatives for several months/years,
please get this REVIEWED by your GP or health professional.



The National Bowel Cancer Screening Programme

Bowel cancer is found in men and women. About 1 in 20 people will develop this. If its found quickly it is easier to treat.

Bowel cancer screening can find small polyps which may develop overtime to become cancerous.

Over 55s will be invited for a one off bowel scope test.

People aged between 60 – 74 will receive a home testing kit every two years.

Gastrocolic Reflex

Gastrocolic Reflex is needing to pass faeces / poo as soon as you have eaten.

This is a reflex response to the introduction of food or drink into the stomach, resulting in an increase in stomach activity, leading to a “call to poo”.

This can be more prominent after breakfast, a warm drink or something to eat.

How can we monitor and document bowel actions?

Monitor and record the amount of faeces (poo) passed and how often.

Use a bowel diary and include and show any changes in bowel habits such as any pain, bleeding, mucus, bloating.

Monitor the colour of the faeces (poo).

If it is **black** and tarry this may mean there is bleeding in the upper GI tract or the person may be on iron therapy.

If it is **maroon** there may be bleeding in the lower GI tract or the person has eaten beetroot.

If the faeces is **bright red** the person may have haemorrhoids but this may be a symptom of a bowel cancer.

If the faeces is a **putty** colour this may signify a liver disease or a bile duct problem.

If the faeces is **pale** and floats this may signify coeliac disease.

