# **Residents and Relatives Newsletter**

Issue 9 March 2018

## **CONSTIPATION**

#### Who is Meditrax?

Meditrax is a group of accredited pharmacists who specialise in medication management. We regularly visit aged care facilities and provide a range of services aimed to optimise medicine management and outcomes for residents. When reviewing a resident's medicine, our pharmacists speak with the resident where possible to gain an understanding of potentially medicine-related issues of concern.

# What is constipation?



The digestive system is responsible for intake of food and nutrition into the body via the mouth, digestion in the stomach, and excretion of waste. Nutrients are

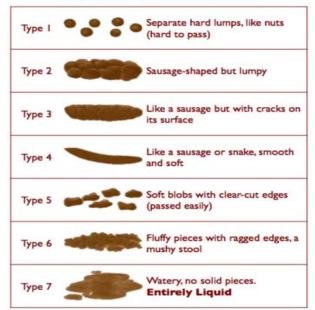
absorbed as food passes through the gastrointestinal tract, giving the body fuel. Once nutrients are removed, waste ends up in the colon as faeces or stools. It is important to monitor bowel motions to avoid constipation. Monitoring is crucial, as everybody has a different bowel pattern and it is important to avoid straining or hard bowel motions. Normal frequency can range from three times a day, to once every 3 days and to pass type 3 or 4 stools according to the chart below.

The Bristol stool chart is a medical aid, used to classify stool into seven groups. Ideally stool should be Type 3 and Type 4. Type 1 and 2 may indicate

constipation. Type 4-6
may indicate
diarrhoea. Type 7
may be a sign of
'overflow
diarrhoea',
caused by chronic
constipation

It is important to tell staff about frequency, and stool consistency, to allow close monitoring, and avoid constipation.

#### **Bristol Stool Chart**



## **Constipation causes**

- Diet without enough fibre
- Dehydration, lack of fluid
- Lack of physical activity
- Some medications
- Some medical conditions, for example, type 2 diabetes

#### **Risks of untreated constipation**

- Hemorrhoids
- Anal fissure
- Faecal impaction (see below)
- Rectal prolapse
- Discomfort and Pain



# Loose stool can sometimes be a sign of chronic constipation

As faeces sits in the colon or rectum, more fluid is drawn from it, and it can become gradually more solid and dry. This can cause a 'hard plug' which can be difficult to evacuate. This is also known as faecal impaction. Liquid from higher up in the colon cannot move along, which leads to a build up of pressure, and the fluid leaks around the sides of the impacted plug.

Symptoms include diarrhoea, abdominal bloating, discomfort and pain, nausea, reduced appetite, vomiting and weight loss. Faecal impaction is treated by using high dose oral laxatives such as Movicol and rectal suppository or enema. Faecal impaction can be avoided by close monitoring of stool, and early identification of constipation.

#### **WORD SEARCH**

**BLOATING** 

**FLUID** 

**BRISTOL** 

**STOOL** 

В	M	X	J	M	M	R	0	
F	L	U	I	D	0	R	T	
G	U	0	Ε	R	В	I	F	
L	A	X	A	T	I	V	E	
Т	0	U	U	T	L	P	E	
Н	L	0	T	S	I	R	В	
Ι	E	F	Т	X	Т	N	F	
J	F	J	S	S	Y	N	G	

# Constipation can be avoided with the following:

- Review medication- Ask for a medication review by a pharmacist
- Increase dietary fibre and Increase fluids- if not on a fluid restriction
- Increase mobility if safe
- Laxatives are helpful and regular use may be necessary. Regular use of laxatives is generally safe
- The timing of bowel motions should be as regular as possible and best after a meal when the natural urge may be greater
- Do not postpone when feeling the urge to defecate

**LAXATIVE** 

**FIBRE** 

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