

Healthy Bowel Habits to avoid Constipation

Cork University Maternity Hospital

What is constipation?

Constipation is a common condition that affects people of all ages. It can mean that you are not passing stools (poo, faeces or motions) regularly or you are unable to completely empty your bowels. Constipation can cause your stools to be hard, lumpy, large or small.

How is constipation defined?

Doctors define constipation in a number of ways:

- Opening your bowels less than three times a week
- Often needing to strain to open your bowels
- Passing hard or pellet-like stools.

What causes constipation?

Several factors can increase your chances of having constipation, including:

- Not eating enough fibre (roughage) in the diet
- Not drinking enough fluid every day
- Immobility or lack of exercise
- Ignoring the urge to pass stools
- Some medicines
- Anxiety, depression and grief
- Pregnancy - hormonal changes of pregnancy can slow down the gut movements. In later pregnancy, it can simply be due to the baby taking up a lot of room in the tummy and the bowels being pushed to one side.
- Prolapse of the vagina or back passage (sagging of the organs that interferes with bladder and bowel control)
- Being underweight or overweight
- Certain medical conditions

What can I do to ease and to prevent constipation?

These measures are often grouped together and called "Lifestyle Advice".

1. Eat foods that contain plenty of Fibre

Fibre is the part of plant food that is not digested. It stays in your gut and is passed in the stool. Fibre adds bulk and some softness to stool. High Fibre foods include:

- Fruit and vegetables
- Dried fruits such as figs and prunes
- Whole meal or whole-wheat bread, biscuits and flour
- Wholegrain breakfast cereals
- Brown rice, whole meal spaghetti and whole meal pasta.
- Nuts and seeds

It is important to eat regular meals to stimulate the bowel. Skipping meals, especially breakfast can lead to a sluggish or irregular bowel habit.

Tips on increasing fibre in your diet:

Bread: Choose wholemeal and whole grain bread, rolls and pittas. Wholegrain breads with nuts are often available in your local supermarket.

Breakfast cereals: porridge, readybrek, muesli, wholegrain cereals e.g. all bran, Weetabix

Fruit: Particularly good sources of fibre are pears, raspberries, apples, oranges, blackberries. If the skin is edible, eat the skin as most of the fibre is in the skin or just underneath it.

Vegetables: Green leafy vegetables are very good sources of fibre e.g. peas, broccoli, courgette, green beans, mangetout, spinach, cabbage, brussel sprouts.

Beans, peas, lentils: All types included tinned, dried, frozen are all very good sources of fibre

Nuts and seeds: These are good to snack on or to add to your breakfast cereal. In particular almonds, flaxseeds and sunflower seeds are good sources of fibre. Milled or ground seeds may be more suitable if you suffer from inflammation of the bowel.

For more information on the fibre content of different foods see

<http://www.wehealny.org/healthinfo/dietaryfiber/fibercontentchart.html>

If you want to check the fibre content of different foods you eat check the packaging and it should tell you the fibre content. Foods that contain 6g or more of fibre per 100g are considered to be high fibre foods.

If increasing fibre in your diet do so gradually to allow your digestive system time to adjust. If you increase too quickly you may experience bloating and cramping. Increasing slowly will avoid this.

2. Drink plenty of fluids

Aim to drink 1.5 to 2 litres (about 8-10 cups) of fluid per day. You will pass much of the fluid as urine, but some is passed out in the gut and softens the stool. Water is the best fluid to drink but milk, tea, coffee, minerals, squashes and juices also make an important contribution to your daily intake of fluid. As a start, try just drinking a glass of water 3-4 times a day in addition to what you normally drink.

Drinking fluids which are room temperature or warmer can improve blood flow to the digestive system, improving how well it works. Try and avoid ice in your drinks or very cold drinks as it will slow down blood flow, not allowing your digestive system to work as well.

3. Exercise

Keeping your body active helps to keep your gut moving. Be as active as you can and enjoy some daily exercise such as walking.

4. Toileting habits

Do not ignore the feeling or the urge of needing to empty the bowel. Some people suppress this feeling if they are busy. It may result in a backlog of stools which is

difficult to pass later. When you go to the toilet, it should be unhurried, with enough time to ensure that you can empty your bowel.

How to help the bowel to empty?




It is best to empty the bowel soon after the urge to empty is felt. This often happens about twenty minutes after eating a meal, especially after breakfast. Take your time when emptying the bowel. Try not to rush the natural process of emptying the bowel.

Check your position on the toilet

Positioning on the toilet is important when emptying your bowels. Putting a small footstool under your feet is a simple way to change your toilet position to aid the passage of stools. Relax, lean forward and rest your elbows on your thighs. You should not strain and hold your breath to pass stools. Relax the tummy muscles by breathing through your mouth and bulging the tummy muscles out.

If you have recently given birth and are concerned about stitches around the area of your vagina, double over a sanitary towel and press it up gently against the stitches to support them as your bowels open.

Correct position for opening your bowels

<p>Step one</p>  <p>foot rest</p> <p>Knees higher than hips</p>	<p>Step two</p>  <p>foot rest</p> <p>Lean forwards and put elbows on your knees</p>
<p>Step three</p>  <p>foot rest</p> <p>Bulge out your abdomen Straighten your spine</p>	<p>Correct position</p>  <p>foot rest</p> <p>Knees higher than hips Lean forwards and put elbows on your knees Bulge out your abdomen Straighten your spine</p>

Reproduced by the kind permission of Ray Addison, Nurse Consultant in Bladder and Bowel Dysfunction, Wendy Ness, Colorectal Nurse Specialist.
Produced as a service to the medical profession by Norgine Ltd. MO/03/11 (6809792) November 2003

Medicines

Some medicines can cause constipation. Examples include: Pain killers (particularly those with codeine or very strong pain killers such as Morphine), Antacids, Antidepressants and Iron tablets, but there are many others.

See the list of possible side effects on the leaflet that comes with any medicine that you may be taking. Tell a doctor if you suspect a medicine is making you constipated. A change of medication may be possible.

Treatment with a laxative is needed only if the lifestyle measures above do not work well. It is still worth persisting with these methods, even if you end up needing to use laxatives. Care should be taken to ensure that you use the right laxative for your needs. Ask your doctor, midwife or pharmacist for help with this.

Physiotherapy Department 021 4920567
Continence Advisory Service 021 4920761