

YOUR BOWEL MOVEMENTS

- ›› Most bowels respond best to a regular habit. About 30 minutes after eating is the most likely time for the bowel to work, because of an internal body reflex called the gastro-colic response.
- ›› Never rush going to the toilet. If you have a tendency to be constipated, set aside at least 10 minutes in the toilet. Preferably this should be at a time when you are not rushing to do other things.
- ›› Sitting differently on the toilet may help your bowel movements. The natural position is a 'squat', which is not practical on most toilets. To mimic this position, try raising your feet with a footstool by around 25cm (10in), keep them flat and hip width apart, and lean forwards on your thighs and relax.
- ›› Remember to breathe normally when having a bowel movement! Some people hold their breath as they try and push but this just makes it harder.
- ›› If you are taking any medicines (either prescribed by your doctor or bought over the counter) you should discuss them with your doctor in case they are contributing to your constipation.

HOW CAN I TALK TO MY DOCTOR?

- You might feel uncomfortable or embarrassed talking to your doctor about your chronic constipation, but remember, doctors talk about embarrassing problems every day and it's important that you give them a complete picture of your symptoms. Sometimes writing a list of things you want to tell them can make it easier. Things to note down include:
- ›› Your symptoms.
 - ›› How long you have been constipated.
 - ›› Any techniques you use to aid a bowel movement.
 - ›› Your medical history.
 - ›› Any medication you are currently taking (including any over the counter treatments for constipation).
 - ›› How your constipation affects your daily life.
- If you have been keeping a diary take this along with you, it will help to give your doctor a clear picture of your bowel movements and lifestyle.

You may like to have a list of questions to ask your doctor. These could include:

- ›› What is causing my chronic constipation?
- ›› Will I need any tests?
- ›› Will there be any long-term effects of being constipated?
- ›› What can I do to help myself?
- ›› What treatment options are there?
- ›› When will you want to see me again?
- ›› Will I need to be referred to a specialist?

WHAT ARE MY TREATMENT OPTIONS?

Treatment options for chronic constipation consist primarily of dietary and lifestyle changes and/or laxatives.

You may wish to talk to your pharmacist to discuss which laxatives are available over the counter.

Other possible treatment options may include complementary therapies, prescription medication or a surgical intervention, in some specific cases.

If your symptoms persist, you should speak to your doctor who may recommend a course of treatment.

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**constipation
CONVERSATIONS**

**WHAT YOU NEED TO KNOW ABOUT...
CHRONIC CONSTIPATION**



WHAT IS CHRONIC CONSTIPATION?

Typical characteristics of constipation are symptoms such as straining, bloating, hard or lumpy stools, tummy ache, feeling like you haven't fully emptied your bowels, or infrequent bowel movements (less than three times a week).

Constipation is considered to be chronic when at least two of the above symptoms are present for at least six months.

Chronic constipation is often experienced for prolonged periods of time; some people have reported having the condition for 10 years or more.

WHO CAN BE AFFECTED?

For a majority of the population, constipation may represent a mild, short-term complaint at some point in their lives. For a proportion of patients however, constipation can be a chronic and sometimes severe and bothersome disorder. Chronic constipation is more common in women and the elderly. Nearly one fifth of women under the age of 50 may suffer from chronic constipation. However, only around one third of people with constipation seek medical advice.

WHAT CAUSES CHRONIC CONSTIPATION?

Chronic constipation can occur for a number of reasons, including:

- » Impaired propulsion of the stool resulting in a slower movement through the bowel.
- » The muscles of the rectum do not work properly so the contents of the bowel cannot be squeezed out.
- » When there is a problem coordinating your pelvic floor or anal sphincter muscles during bowel movements.
- » Regular use of certain medications.
- » Neurological conditions such as multiple sclerosis and Parkinson's disease, or direct injury to the spinal cord.

HOW IS CHRONIC CONSTIPATION DIAGNOSED?

Your doctor will use a number of criteria to establish whether you have chronic constipation. This not only includes discussing the frequency of bowel movements but also all aspects of your experience with constipation, including how symptoms such as straining or bloating make you feel.

Occasionally your doctor may carry out tests for constipation although usually a thorough medical history is sufficient. If your doctor does decide to carry out some tests they may be:

- » Blood tests (looking for anaemia or thyroid stimulating hormone).
- » Rectal examination to check how the muscles or nerves around your rectum are working.
- » Colonoscopy using a camera to look at the lining of your bowels.
- » A colon transit study which shows how fast small markers that are visible on an x ray move through your bowel.

CAN CHRONIC CONSTIPATION LEAD TO OTHER COMPLICATIONS?

In very rare cases, chronic constipation can lead to further complications. If you are concerned about any of your symptoms, you should discuss this with your doctor.



WHAT CAN I DO TO HELP MY CONSTIPATION?

Try keeping a diary to track your chronic constipation-related symptoms, which you can then discuss with your doctor at your next visit. Note down the frequency and consistency of your bowel movement and anything else you think may be useful to record, such as what you have eaten and if you have done any exercise.

DIET AND EXERCISE

The recommendations below may not be suitable for all patients. If you are unsure, please consult your doctor.

- » Eating regularly is a good natural stimulant for your bowel. Skipping meals, especially breakfast, can contribute to a sluggish or irregular bowel habit.
- » A high fibre diet may help your constipation. Fruit, vegetables, nuts, wholemeal bread and pasta, wholegrain cereals and brown rice are all good sources of fibre. Try and have at least one high fibre food at every meal and eat five servings (or approximately 400g) of fruit or vegetables every day to improve your overall nutrition.
- » Some people find it helps to have their fibre from fruit or vegetables (soluble fibre) rather than in cereals or grains (insoluble fibre), because insoluble fibre can sometimes lead to bloating and discomfort.
- » Remember, if you suffer from chronic constipation and already have an adequate intake of fibre, be careful to not eat too much fibre as it may make your constipation worse.
- » Try to drink at least eight glasses of fluid each day. It is not advisable to drink too much caffeine (coffee, tea and cola) as this can be dehydrating, as is alcohol. Too much fluid intake however can sometimes make you feel more bloated and is unlikely to improve your bowel function further.
- » Sport and exercise can improve bowel habits in some people. If you lead a very sedentary lifestyle (such as driving to work and then sitting at a desk all day), add in some incremental exercise, such as taking a regular walk at lunchtime. Small measures like this can make a real difference.