

Managing Constipation

What is constipation?

- Bowel movements occurring less often than what is the normal pattern
- Hard stool
- Increased difficulty moving bowels

What to report to the hospice/palliative care team?

- No bowel movement in 2 days or a change in the frequency of bowel movements
- Pain, cramping, tenderness
- A feeling of fullness or bloating
- Blood in stools
- Diarrhea or oozing stools

What can be done?

The good news is that there is much you, your caregiver and the hospice/palliative care team can do for constipation. The team will try to discover the underlying cause and discuss treatments best for you.

- Record when the bowel movements have occurred. An example of a Bowel Movement Record is attached to this document and available in the *Managing Constipation* Teaching Sheet on the HPNA Website at: <http://www.hpna.org/DisplayPage.aspx?Title=Patient/Family%20Teaching%20Sheets>
- Follow a regular bowel regimen, even if you are not constipated (many medications can cause constipation)
 - Drink as much fluid (liquids) as is comfortable. Drinking warm liquids may promote bowel movement
 - Eat more fruits and fruit juices, including prunes and prune juice
 - Increase physical activity if possible. Walking can be beneficial
 - Take laxatives/stool softeners as ordered by healthcare provider
 - Sit upright on toilet, commode or bedpan
 - Establish routine times for toileting
 - Avoid bulk laxatives if not taking enough fluids
- Notify hospice/palliative care team if constipation continues

BOWEL MOVEMENT RECORD

DATE and TIME of BM	CONSISTENCY of STOOL Examples include; hard, soft, liquid	ABDOMINAL SYMPTOMS Examples include; bloating, distention, gas cramping, nausea, vomiting, reflux, heartburn	PROBLEMS WITH PASSING STOOL Examples include; straining, incomplete passage of stool, leakage of stool, diarrhea, hemorrhoidal pain or bleeding

QUESTIONS OR COMMENTS FOR THE HOSPICE AND PALLIATIVE HEALTH TEAM