



**Volume 4, Issue 9
October 15, 2011**

A Publication of the Office of
Training and Professional
Development

Constipation Complications:

Constipation is frequently an indication or precursor to additional medical challenges. Characteristics of the following conditions need to be monitored:

1. Bowel obstruction (complete blockage)
2. Anal fissures (small tears and bleeding)
3. Anal distension
4. Colon diverticulitis (small pouches from weakening of the colon wall)
5. Rectal prolapse (intestinal lining pushing through the anus)
6. Fecal impaction (stool blocks the colon/ rectum)

Body Systems and Constipation characteristics:

1. Gastrointestinal: bloating, distention, pain and palpitation, absence of bowel sounds, flatulence, fecal odor on breath
2. Neurological: malaise, lethargy, change in verbalization and change in routine
3. Skin: hydration status, anal irritation (scratching, digging) and rectal hemorrhoids (straining with stool)
4. Psychosocial: Privacy and availability of bathroom and scheduled time of availability for access to the bathroom

The Fatal Four: Constipation *A Major Challenge that Impacts People with Developmental Disabilities*

Serving People with Disabilities in Community Settings



What is Constipation

Constipation is difficult to define because as a symptom it varies from person to person. However, generally it is when an individual has difficulty passing stool; the stools are hard, dry and often look like marbles. The frequency of bowel movements varies greatly from person to person. Bowel movements are considered normal as long as they are soft, normal and passed easily out of the bowel. Quantifying the condition in an adult means no bowel movement in three days or a child in four days.

Risk Factors for Constipation

There are a long list of factors that may put people with developmental disabilities at risk for constipation. Beyond the obvious fact that we generally don't discuss the frequency of bowel movements or observe each other having them, it is often difficult for people to know whether stools are infrequent, or whether those we care for are having increased difficulty in moving their bowels.

However, there are several factors that put people, especially those with developmental disabilities at risk:

- Neuromuscular degenerative disorders, such as cerebral palsy, that impair the central nervous system's response for the need to elimination.
- Spinal cord injuries or birth defects, such as spina bifida, that affect neural responses needed for elimination.
- People with muscle weakness, such as down's syndrome, who lack the strength needed for adequate bowel function.
- Diets that do not contain enough fiber and fluids.
- Poor swallowing skills with aspiration risk making it difficult to eat and drink adequate amounts of fiber and fluids.
- Inadequate or inconvenient access to the bathroom.
- Immobility and bad body alignment that leads to poor positioning for bowel elimination.
- Poor toileting habits or lack of privacy and time for toileting.
- Medication that slows gastric motility
- Repression of the urge to defecate due to psychiatric issues.

Signs/ Symptoms for Constipation

Due to the difficulty in recognizing constipation the following signs should be noted as warning signs of constipation.

- Spending a lot of time on the toilet or in the

- bathroom without explanation;
- Straining and grunting while attempting to pass stool;
- Refusing to eat or drink.;
- Hard small and dry feces;
- Hard, protruding abdomen;
- Vomiting digested food that smells like feces; and
- Bloating and complaints of stomach discomfort.

Diagnoses of Constipation

Diagnosing constipation can be a challenging and multifaceted determination. This diagnosis may require physical exams, lab tests and an in person interview. This last diagnostic technique may be more challenging with people who are non-verbal.

The following questions are examples of the type of questions a doctor or you may ask to assess the affected person’s condition and treatment options:

- What are the normal bowel habits;
- How long has there been difficulty passing stool;
- When was the last time stool was passed;
- Can person pass gas; and
- Does person have any abdominal or anal pain.

In making a preliminary determination regarding constipation a health care professional may examine the patient’s abdomen, anus, and other body systems. What will be examined will depend on the interview responses or information provided by a

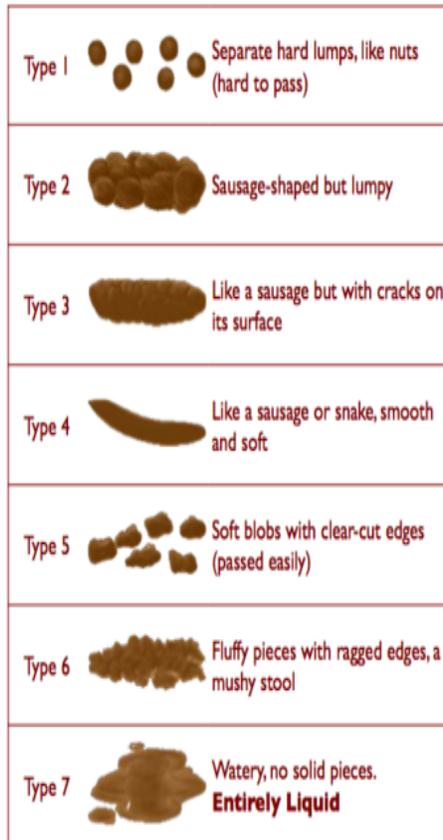
caregiver.
 Lab test for constipation may include examination of stool under a microscope, complete blood count (CBC) and blood film and a thyroid function test if hypothyroidism is suspected.

The following imaging may also be utilized in diagnosing constipation:

- Barium enema may reveal a disease of the colon; and
- Assessment of food movement may demonstrate a prolonged and delayed transit time.

If necessary a physician may also conduct a sigmoidoscopy to detect problems in the rectum and lower colon or a colonoscopy if irritable bowel syndrome is suspected or to rule out more serious problems. Lastly, the doctor may take tissue biopsies for

Bristol Stool Chart



further study to assess the cause underlying the symptoms.

Recommended Constipation Prevention Strategies

Suggestions for how to prevent and address constipation are similar between people with developmental disabilities and those in the general population. However, some of the options for prevention and treatment of this condition are further complicated by the challenges of the people for which we care. The following strategies may help to prevent constipation:

- High fiber diet (20-35 grams/day)
- Limit foods with no or little fiber (cheese, meat, processed foods)
- Regular exercise;
- Adequate fluid intake;
- Adequate time for bowel movements;
- Proper positioning;
- Laxatives under medical supervision; and
- Track BM frequency, consistency, volume.

In addition to the approaches listed above some experts suggest notifying a physician if a person is constipated for 3 or more days, or as directed by a physician if constipation occurs after beginning a new prescription, vitamin or mineral supplements accompanied by blood in stools, fever or abdominal pain.

This Learning Curve is based information from the following resources: Developmental Disabilities