

PREVENTING, MANAGING AND Treating Constipation

What to do:

- Drinking lots of fluids is very important. Drink 8 to 10 cups of liquid each day (if allowed by your doctor).
- Try to eat at the same times each day.
- Eat foods high in fiber (e.g., uncooked fruits with the skin on, leafy green vegetables, whole grain breads and cereals, fresh raw fruits with skins and seeds).
- Add 1 or 2 tablespoons of unprocessed bran to your food. This adds bulk and helps with bowel movements. Sprinkle on food at mealtimes.
- Avoid foods and drinks that cause gas such as cabbage, broccoli, cauliflower, cucumbers, dried beans, peas, onions and carbonated drinks if they don't work for you.
- Get as much exercise as you can, even if that means only walking a very short distance.
- When on the toilet, try using a small footstool to help relax the muscles for an easier bowel movement.
- Try to have a bowel movement whenever you have the urge.
- Use stool softeners and laxatives only as instructed by your doctor or nurse.
- Use a rectal suppository only after checking with your doctor or nurse.
- If you are confined to bed, try to use the toilet or bedside commode when you have a bowel movement. Check with your doctor or nurse first to see if it is safe to leave the bed.
- Use an enema to provide immediate relief from constipation, but first check with the doctor or nurse. Enemas should be the last step for relieving constipation. They drain the lower bowel and help the upper bowel move as well.

Do not:

- Do not strain or use extreme force when trying to move your bowels.
- Do not use over-the-counter laxatives or enemas unless first discussed with your doctor.
- Do not use laxatives and enemas if you have a low white blood count or low platelet count.

Treating constipation:

Constipation is common in patients with cancer. Chemotherapy, pain medications and decreased energy for activity can all slow bowel activity.

If constipation is still a problem, this is a bowel regimen you can try using over-the-counter laxatives:

1. Start with Senna (sennosides) two tablets at bedtime.
If no bowel movement (BM) on day 1:
2. Increase Senna to two tablets twice a day.
If no BM on day 2:
3. Increase Senna to three to four tablets twice a day.
If no BM on day 3:
4. Add Miralax (17 grams polyethylene glycol) one to two times a day.
If no BM on day 4:
5. Contact your medical team. You may be asked to use:
 - Magnesium citrate (8 oz. by mouth)
 - Lactulose (30 ml by mouth)
 - Bisacodyl (Dulcolax) suppository, or saline enema (*Do not use if blood counts are low — if unsure, ask your medical team.*)
 - Your medical team may ask you to come in for physical examination to rule out impaction (dry stool blocking the exit) or other causes of constipation.
 - You may be prescribed a stronger medication for constipation.

If at any step the medication is effective, continue at that dose. For loose stools, hold laxatives for one day, then restart if loose stools have stopped.

If at any time you develop rectal bleeding, fever and chills, or severe abdominal pain, please contact your medical team immediately.