Health and Welfare Alert



Constipation and Bowel Obstructions #72-11-23

Talking about constipation can be embarrassing, but it is essential for good health, especially for those we support. A 2021 article* indicates that around 40% of people with intellectual and developmental disabilities (IDD) experienced constipation. Constipation can severely impact a person's quality of life. Not only is constipation extremely painful, but complications from constipation can cause serious illness, including death. It's important that you know how to monitor, document, and communicate concerns about constipation and bowel obstructions. By doing so, you could save a life and support people to be their healthiest.

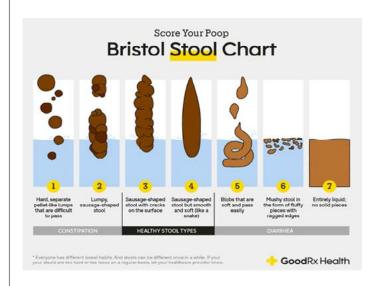
- Constipation is when a person experiences a decrease in the frequency of bowel movements or passes hard, dry stools; trouble defecating; or sluggish action of the bowels
- Bowel obstruction (blockage) is a serious problem when something blocks the small or large intestines (bowels). Since there is a blockage, food, liquids, and stools may not be able to move freely.
- Encopresis, sometimes called fecal incontinence or soiling, is the repeated passing of stool (usually involuntarily) into clothing.
- Neurogenic bowel is the loss of normal bowel function. It's caused by a nerve problem. A spinal cord injury or a nerve disease may damage the nerves that help control the lower part of your colon. This is the part of the body that sends solid waste out of the body. This condition gets in the way of your normal ability to store and get rid of waste. It often causes constipation and bowel accidents.

Most Common Signs and Symptoms of Constipation:

- Passing fewer than three stools a week.
- Small, hard, and dry stools that may be painful to pass.
- Straining to have bowel movements.
- Difficulty passing the stool.
- Stomach ache or cramps.
- Bloated or pain from abdomen.
- Refusing to eat or drink.
- The sensation that the bowel hasn't fully emptied.
- Abdominal cramps.
- Having to sit on the toilet for a long time.
- Increase in aggression.

Bristol Stool Chart

https://www.goodrx.com/well-being/gut-health/bristol-stool-chart



Fast Facts:

- Bowel obstructions are one of the leading causes of death in people with IDD and are often preventable.
- Nineteen people served have died due to bowel obstructions in the last three years. 2022 (5 deaths), 2021 (6 deaths) and 2020 (8 deaths).
- Since January 2020, over 560 Ohioans with IDD were hospitalized due to bowel obstruction.
- Medication side effects can contribute to constipation. Watch for constipation in persons who take antacids, anticonvulsants, antidepressants, tranquilizers, iron supplements, medication for urinary control or if they use narcotics or other drugs for pain relief.

Case Examples:

- A 28-year-old man returned home from work. His stomach was bloated, hard to the touch, and he had several loose stools. He had a history of bowel obstructions due to being on multiple psychiatric medications and having cerebral palsy. His physician was contacted right away, and an x-ray was ordered, which confirmed an obstruction. He was hospitalized, treated, and released.
- A 62-year-old woman was found in her bedroom. She had vomited and was unresponsive. She was taken to the hospital, where she was diagnosed with a bowel obstruction and sepsis and later passed. She had seizures, was on an antidepressant, and has limited mobility.

Can you still have a bowel movement with an obstruction?

It's a common misconception that you can't have a bowel movement if you have a bowel obstruction.

Some people do pass stool even when they have a bowel obstruction. Their symptoms are typically pain, bloating, and nausea. You can even have loose stools but still have a bowel obstruction.

Symptoms of bowel or partial bowel obstructions are:

- Severe pain in your belly.
- Abdominal cramping, swelling, bloating, or diarrhea.
- Nausea.
- Vomiting, especially when experiencing fecal odor.
- Feelings of fullness or swelling in your belly.
- · Loud sounds from your belly.
- Feeling gassy but being unable to pass gas.
- Straining to pass stool.
- Reluctant to eat.

*A Primary Care Approach to Constipation in Adults with Intellectual and Developmental Disabilities

Multiple meds

with constipating

effects



Preventative Strategies

- Establish a constipation protocol for individuals taking stool softeners, laxatives on a routine basis, or have history of bowel obstruction.
- Make sure all staff are trained on the protocol and know the importance of monitoring.
- Track bowel movement frequency, consistency, and volume for those that need that support.
- Drink plenty of fluids.
- Stay active and plan activities that promote movement.
- Assist individuals to establish a schedule (encourage bathroom breaks 20-30 minutes after meals).
- Allow plenty of time for bathroom breaks.
- Follow positioning protocol to promote natural bowel motility.
- Discuss treatment strategies with the individual's primary care physician (PCP), including implementation of a protocol to ensure the individual receives the prescribed treatment and proper monitoring for prevention of complications.

Unhealthy

diet

 Administer stool softeners and/or laxatives as prescribed by the doctor.

Reasons for Constipation Department of Developmental Disabilities Not drinking enough water Inactive lifestyle