

Northamptonshire Dietary and Lifestyle Advice for Management of Constipation in Adults

Habit

- Bowel elimination is a routine activity of daily living and should not be seen as any less important than any other part of treatment or rehabilitation plan.
- Normal habit varies greatly amongst individuals, from passing motions twice a day to once every two or three days.
- Specific foods or drinks may physically or psychologically stimulate defecation. Similarly an established routine exercise may be the stimulant, either of which, when missing, can contribute to constipation.
- Lack of privacy, fear of interruption, noticeable sounds or odour can inhibit defecation and so contribute to the disruption of habit, leading to constipation.
- Assess normal habit; consider information from carers if the patient has impaired cognitive function, neurological impairment etc..

Diet

Diet has an important role to play in the maintenance of good bowel health. Achieving a good quality dietary intake should be considered primarily as a preventable measure but may also be useful in the management of bowel problems.

The essential factors to consider include:

- Meeting recommended fluid intake requirements
 - Fluid should be taken with and between meals.
 - Unless there is a medical contraindication or a demonstrable need for more/less fluid, intake should be encouraged to achieve the following within 24 hours:
 - 30ml/kg actual body weight for those aged over 60 years old
 - 35ml/kg actual body weight for those aged 18-60 years old
 - 50ml/kg actual body weight for those aged 15-18 years old
 - Individuals who may require different amounts of fluid include those with renal failure, liver failure and the obese.
- Encouraging regular meals
 - Individuals should be encouraged to eat three times a day, at regular intervals to establish a regular pattern.
- Achieving an adequate dietary fibre intake
 - Two types of fibre should be consumed to gain all of the expected benefits of fibre.
 - Insoluble fibre: All Bran, Weetabix, Wholemeal bread, Brown rice.
 - Soluble fibre: Porridge, Fruit (fresh, tinned or in puddings), Beans/lentils, Jacket potatoes, Baked beans, Vegetables and salads.
 - Any increase in dietary fibre should be done gradually to prevent discomfort due to wind.
 - It is important to note that a high fibre diet should be avoided in immobile patients.

It is important to be aware of clinical conditions which may require treatment e.g. Crohn's disease.

Exercise

- Encouraging exercise is particularly good health advice for patients with constipation.
- Often lack of mobility is a contributing factor.
- Most people can do some form of movement to aid the process.

References:

Information from Southern Derbyshire Continence Service. Resource pack for bowel management in adult patients – December 2004
MeReC Bulletin Volume 14 Number 6. The Management of Constipation.