



A Patient's Guide to Chronic Constipation

Ivana Radosavljevic, MD

What is constipation?

- Bowel movements that are frequently hard or lumpy and require straining or manual maneuvers to pass
- Less than 3 bowel movements weekly, although varies by person

Lifestyle modifications

- Increase water intake (8 glasses of water per day) and physical activity (e.g., walks, stretching)
- Develop a regular bathroom routine, like going after breakfast, and do not ignore the urge to void
- Increase dietary fiber intake

Most common causes




- Low water intake
- Low dietary fiber intake
- Physical inactivity
- Habitual withholding or ignoring the urge to have a bowel movement
- Medications (e.g., iron tablets, opioids)
- Other medical conditions (e.g., hypothyroidism, diabetes)

What foods are high in fiber?

- Whole fruits with edible skins or pulp (e.g., apples, berries, citrus with pulp)
- Vegetables with skins and hearty textures (e.g., carrots or broccoli)
- Whole, unrefined grains and bran-rich foods
- Beans, lentils, nuts, and seeds

HOW MUCH FIBER PER DAY?

The Institute of Medicine recommends:

Children		Amount:
	1 - 3 years	19g
	4 - 8 years	25g
Adult Males		
	19-50 years	38g
	>50 years	30g
Adult Females		
	19-50 years	25g
	>50 years	21g
	pregnancy	28g
	lactation	29g



Increased fiber intake promotes a healthy gut microbiome and may protect against colorectal cancer, inflammatory bowel disease, and irritable bowel syndrome



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Over-The-Counter Treatment Options

1. Fiber supplementation

- Increases stool bulk and helps stool passage
- Example: Psyllium husk (Metamucil) 10g/day
- Can worsen constipation if not adequately hydrated
- Flatulence is a common side effect

2. Osmotic laxatives

- Draws water into the colon to soften stool and help passage
- Example: Polyethylene glycol (Miralax) 17g or 1 cap, 1-2x/day
- Use with consideration in elderly, can cause dehydration

3. Stimulant laxatives

- Stimulates colonic contraction and secretion of fluids
- Example: Sennosides, Bisacodyl
- Can develop tolerance, best used as rescue therapy as needed



If constipation persists despite the above measures, see your provider for further management

Complications of untreated chronic constipation

Hemorrhoids

Swollen veins in rectum or anus that can bleed or become painful

Anal Fissure

Small tears in the lining of the anus that cause pain and bleeding during bowel movements

Fecal Impaction

Hard stool ball that becomes stuck in rectum or colon and may need manual removal

Rectal Prolapse

Part of the rectum protrudes from the anus

Diverticulosis

Small pouches in the colon wall that can become infected, leading to diverticulitis