

Disorders of Bowel Function:

Constipation, Diarrhea, and I.B.S. (Irritable Bowel Syndrome)

A normal stool is formed, soft and eliminated every 1-2 days. Symptoms of disorders of bowel function include chronic constipation, periodic diarrhea or both. These disorders in bowel function may occur occasionally or be a daily pattern. They may be a symptom of another disease, an allergy to something ingested, or a habit. Rectal bleeding and pain may be present and can be due to hemorrhoids, anal fissures, or inflammation or tumors of the bowel.

Constipation occurs when the stool remains in the rectum longer than normal and becomes dehydrated and hard. Trying to pass a large amount of hard stool can cause abdominal cramping, nausea, gas pains, pelvic pain, and anal bleeding. Constipation is frequently due to not taking time to have regular bowel movements, inadequate intake of fluids and dietary fiber. Medical disorders such as hypothyroidism may be the cause.

Diarrhea is an increase in the frequency, volume, and liquidity of stool and may be associated with abdominal cramping. Acute diarrhea may last up to 2-3 weeks, while chronic diarrhea lasts more than 4 weeks. Physical examination and laboratory testing will help categorize and narrow the possible causes of diarrhea. Acute diarrhea is usually due to infection from contaminated water or food. Chronic Diarrhea may have the same origins as the acute form. Other causes include laxative abuse, diabetes and hyperthyroid disorders.

Dietary Treatment of Constipation and Diarrhea:

Drinking plenty of fluids (about 60 oz. a day), eating foods that contain 30–35 grams of fiber, and regular exercise are the mainstays to avoiding constipation and will also help correct chronic diarrhea. Taking time on a regular basis to have a bowel movement should be an important part of our daily routine. Eating foods that are rich sources of fiber is a natural way to create bulk in your stool.

Foods that are high in fiber, expressed in grams of fiber per serving, include:

Prunes, canned, 1 cup	13.8
Almonds, roasted, ½ cup	8.0
Blackberries, 1 cup	7.2
Boysenberries, 1 cup	7.2
Peanuts, roasted, ½ cup	6.3
Pinto Beans, ½ cup	5.9
Kidney Beans, ½ cup	5.5
Brown Rice, ½ cup	5.3
Grapefruit, 1 medium	3.6
Brussels Sprouts, ½ cup	3.5
Apple, with peel, medium	2.8
Spaghetti, 2 ounces	2.6
Oatmeal, 1 ounce	2.5

Carrots, ½ cup	2.4
Whole Wheat Bread, 1 slice	2.1
Potato, baked, with skin	2.0
Green Beans, canned, ½ cup	1.9
White Rice, ½ cup	1.4
Bran Cereal, 1 ounce	0.7
French Bread, 1 slice	0.7
Lettuce, iceberg, ½ cup	0.2

Medical Treatment of Constipation:

When these mainstay dietary lifestyle measures are not enough to prevent constipation or control episodes of diarrhea, use the dietary recommendations listed below. If the stool is not soft enough to pass comfortably, then increase the morning fiber and/or the evening stool softeners until you have found the correct dosage.

In the morning with breakfast use one of the following bulk stool softeners. Follow the directions on the package:

- Benefiber Powder, Tablets or Wafers (preferred)
- Konsyl Easy Mix Powder
- Metamucil Powder
- Fibercon Tablets
- Citrucel Powder

If you are unable to move your bowels each day, use one of the following in the evening:

- Miralax Powder
- Senokot-S
- Colace 200 mg.

Remember to take time on a daily basis to go to the bathroom (usually after morning breakfast with coffee or tea). Your bowel is trainable, but you have to train it.

Medical Treatment of Diarrhea:

- Pepto-Bismol 2 tablets or 2 tbsp every 30 minutes; Total: 8 doses
- Kaopectate 30 ml (1 oz.) after each loose stool; may repeat up to 7 doses in 24 hours
- Imodium 4 mg tab or liquid initially, then 2 mg after each loose stool

Irritable Bowel Syndrome

Approximately 20 percent of the U.S. adult population report symptoms of irritable bowel syndrome, commonly referred to as 'IBS'. The ratio of women to men is three to one. It is the most common functional bowel disorder, and one of the top 10 reasons for patient visits to their primary care provider. Symptoms typically include periodic diarrhea, frequently alternating with constipation. The diarrhea symptoms frequently follow the ingestion of certain foods, such as milk products.

Up to 75 percent of women presenting with chronic pelvic pain are diagnosed with IBS. Patients frequently experience pain with intercourse and/or cyclical pain related to their menstrual cycles. Women with IBS will frequently have had a laparoscopy procedure to diagnose the cause of their pelvic pain. In addition, IBS patients are more likely to experience fibromyalgia and irritable bladder disorders, such as interstitial cystitis. Psychosocial stress and conflict can alter the motor function of the colon for both healthy women as well as those with IBS.

Diagnosis of IBS:

The diagnosis is usually based on the patients' history and symptoms, including dietary habits, changes in bowel patterns and psychosocial stressors. The thorough history and physical examination, blood tests and stool tests for blood and infection should be obtained. A flexible sigmoidoscopy or a colonoscopy is frequently necessary to establish the diagnoses of IBS. Important symptoms include unexplained weight loss, nocturnal symptoms, blood in stool, recent antibiotic use, and family history of colon diseases.

Treatment: of IBS:

Treatment of IBS varies with treatment of any specific contributing cause. Dietary changes, including increasing dietary fiber, fluid intake, and changing the size and timing of meals. A trial of avoiding the ingestion of certain substances is often beneficial, including caffeine, artificial sweeteners, dairy products, alcohol, and gas-forming vegetables (broccoli and cauliflower). Medications to relax the colon are frequently beneficial. Stress management programs and acupuncture may also improve symptoms. Medication: Doxepin 10 mg 1 q hs.

For further information about these disorders of bowel function click on the following web links:

Constipation: <http://www.digestive.niddk.nih.gov/ddiseases/pubs/constipation/Constipation.pdf>

Diarrhea: <http://www.digestive.niddk.nih.gov/ddiseases/pubs/diarrhea/Diarrhea.pdf>

Irritable Bowel Syndrome: <http://www.digestive.niddk.nih.gov/ddiseases/pubs/ibs/ibs.pdf>