

Bowel Problems: Prevention and Treatment



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Bowel Changes During Cancer Treatment

Cancer may change your normal bowel patterns, depending on the type of cancer you have and your treatment plan. These changes can affect how you feel and your ability to go about your daily activities. If you have constipation or diarrhea, this guide can help. You will learn the symptoms and causes of bowel problems and how to treat them.

Though you may feel embarrassed, your care team is trained to help patients with bowel problems. It is very important to report signs and symptoms to your care team. The sooner you tell your team, the sooner they can work with you to relieve your symptoms.

Normal Bowel Movements

Body waste – called stool – is usually medium brown, soft and formed. “Normal” depends on the person. Only you know what is normal for you. Is your stool too difficult to pass? Are your bowel movements more or less frequent than before?

There are 7 types of stool. See the **Bristol Stool Chart**. Types 3 and 4 are best for comfort and overall health.

How do bowel movements happen?

The organs in the body that help digest food are part of the digestive system, also called the gastrointestinal

(GI) tract. After food passes through the stomach and small intestine, the leftover material is mostly waste products in liquid form. This liquid stool then enters the large intestine, or colon, where water is absorbed for use in the body. The last portion of the colon empties stool into the rectum. The rectum acts like a pouch to hold stool until a bowel movement happens. During a bowel movement, stool passes through the anus and out of the body. New food can then move through the digestive system and supply the body with nutrients.








How often should I go?

Frequency is different for each person, but should happen in a consistent pattern from day to day. Bowel movements usually happen after a big meal when contents in the GI tract move down to make room for incoming food. For example, many people have a bowel movement in the morning after eating breakfast.

The frequency of how often you go during cancer treatment may be related to how much food you eat. Everyone is different, but a **general guideline** is:

- If you eat 3 meals a day, expect a bowel movement every day.
- If you eat half your normal amount of food, expect a bowel movement every other day.
- If you eat one third of the amount, expect a bowel movement every third day.

Bristol Stool Chart

Type 1		Separate hard lumps	Severe constipation
Type 2		Lumpy and sausage like	Mild constipation
Type 3		A sausage shape with cracks in the surface	Normal
Type 4		Like a smooth, sausage or snake	Normal
Type 5		Soft blobs with clear-cut edges	Lacking fiber
Type 6		Mushy consistency with ragged edges	Mild diarrhea
Type 7		Liquid consistency with no solid pieces	Severe diarrhea

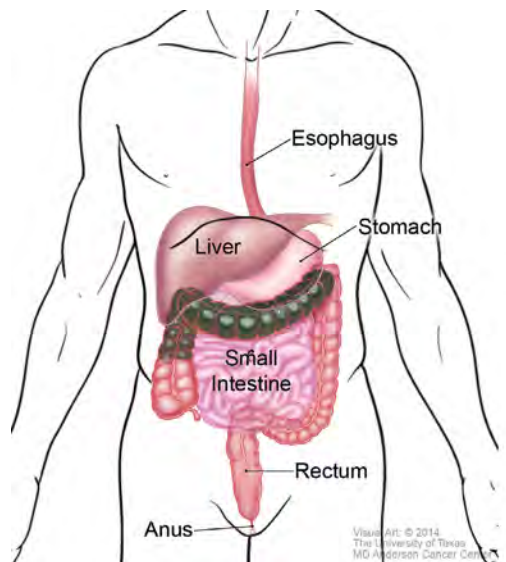


Image 1. High Impaction

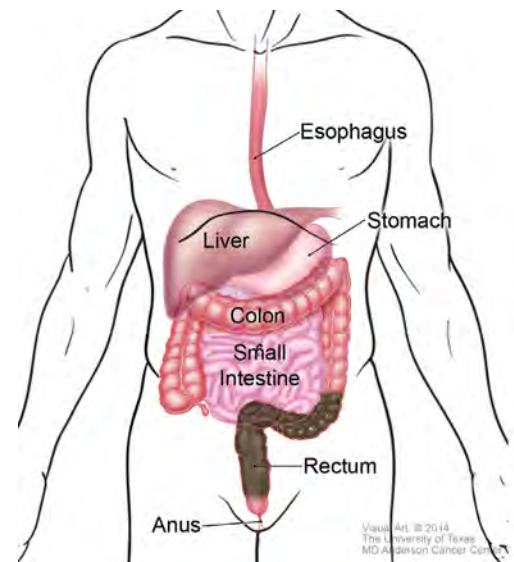


Image 2. Low Impaction

Constipation

Constipation is the infrequent or difficult passing of hard, dry stool.

Causes

- Not drinking enough fluid
- Not eating enough food
- Not enough fiber in the diet
- Lack of physical activity
- Constipating medicines

Constipating Medicines

If you take constipating medicines, like opioids for pain or anti-nausea medicines, consider also taking a stimulant laxative or stool softener. Ask your care team which laxative or stool softener may help you. See the **Laxative and Stool Softener** section for more information.

Prescription and non-prescription medicines may change your bowel movements. Ask your doctor or pharmacist how your medicines might affect your bowel patterns.

Symptoms

- Bloating, gas
- Hard stool
- No bowel movement for 3 or more days
- Straining during a bowel movement

Report the following symptoms to your doctor:

- Abdominal pain, cramping
- Blood in your stool
- Constipation followed by diarrhea – This may be a sign of severe constipation.
- Fever
- No bowel movement for 3 or more days
- Nausea and vomiting

Impactions

An impaction is a case of severe constipation. It is a build-up of stool either in the upper or lower part of the colon. Images 1 and 2.

An impaction can happen if constipation is not treated.

Symptoms

- No bowel movement for 5 or more days
- Not being able to eat
- Not being able to pass stool that you feel in the rectum
- Not being able to sit comfortably, because it feels like you are sitting on something
- Pain in the belly or the belly becoming swollen and possibly hard
- Passing liquid stool that is seeping around formed stool

Call your care team **right away** if you think you may have an impaction.



Treating Constipation

Follow these tips to help treat constipation.

- Drink a hot or warm liquid after eating a meal. Hot liquids help make bowel movements easier to pass for some people.
- Eat small, frequent meals every 2 to 3 hours.
- Add high-fiber foods to your diet unless you have been instructed to limit fiber intake.
- Drink 64 to 80 ounces of water or fluids every day and avoid drinks with caffeine.
- Take a short walk after meals if you can.

Preventing Constipation

Follow these prevention guidelines when you no longer feel constipated.

- **Fluid:** Drink 64 to 80 ounces of non-alcoholic fluids every day. At least half of your daily fluid intake should be from non-caffeinated fluids, like water. Consider including these hot or warm fluids as part of your intake every day:
 - Broth
 - Decaffeinated tea or coffee
 - Herbal tea
 - Water with lemon

Check with your care team if you have instructions to limit your fluid intake.

- **Food:** A high-fiber diet means eating 25 to 35 grams of fiber every day. If you are able to be active every day, like being out of a chair or bed more than half the day, and can drink 64 to 80 ounces of fluid every day, eating a high-fiber diet can help prevent constipation. Good food sources of fiber include:
 - Whole grains: These include high-fiber cereal with 4 grams of fiber per $\frac{1}{3}$ to $\frac{1}{2}$ cup of cereal and foods made with whole wheat flour, whole oats or oat flour, corn meal or brown rice.
 - Peas and lentils: Pinto beans, black beans, white beans, chickpeas, split peas and black-eyed peas.
 - Fruits: Especially blackberries, raspberries and prunes.
 - Vegetables: Especially those eaten with the skin on.
 - Ground flaxseed, chia seeds and wheat germ. Add these to yogurt, oatmeal or smoothies.





- **Fiber:** Ask your care team about taking medicinal fiber. Common brands of medicinal fiber are psyllium (Metamucil®) and methylcellulose (Citrucel®). Medicinal fiber is available without a prescription at grocery and drug stores. Tell your care team if you have instructions to avoid or limit fiber intake.

Do not take medicinal fiber if you have a history of blockages in the bowel or if you are on chemotherapy that causes diarrhea.

- **Activity:** Physical activity every day helps keep the digestive system active. Ask your doctor about how much physical activity is best for you.
- **Timing:** Go to the bathroom right away when you feel the urge to have a bowel movement – do not wait.



For constipation: Generic brands of combination stool softener and stimulant laxatives

Laxatives and Stool Softeners

Laxatives and stool softeners are medicines that can help you have a bowel movement. Laxatives help move stool through the GI tract and stool softeners help soften stool to make it easier to pass. These medicines are available in many forms and may be purchased in drug and grocery stores without a prescription.

The **Laxatives and Stool Softeners** chart provides information on products to help treat constipation. Your care team can help you decide which product to use. Keep in mind that many store brand or generic products work as well as name brand products and often cost less.

Contact your doctor, nurse or pharmacist if you have questions.

Laxatives and Stool Softeners					
Type	Examples	Action	Side Effects	Forms	Time to Work
Medicinal Fiber Laxatives	<ul style="list-style-type: none"> • Methylcellulose (Citrucel®) • Psyllium (Metamucil®) 	Absorbs fluid into the intestine to form a thick liquid that helps move stool through the GI tract	<ul style="list-style-type: none"> • Bloating, gas • Choking if not taken with enough water • Cramping 	<ul style="list-style-type: none"> • Powder to stir into water or other liquid • Tablet 	12 to 72 hours
Osmotic Laxatives	<ul style="list-style-type: none"> • Polyethylene Glycol 3350 (Miralax®) • Lactulose (prescription only) 	Increases fluid in the colon to help stool move through easier	<ul style="list-style-type: none"> • Bloating, gas • Cramping • Dehydration • Diarrhea 	<ul style="list-style-type: none"> • Liquid • Powder to stir into water or other liquid 	24 to 96 hours
Saline Laxatives	<ul style="list-style-type: none"> • Magnesium citrate • Milk of magnesia • Sodium phosphate 	Increases fluid in the small intestine to help move stool through the GI tract	<ul style="list-style-type: none"> • Bloating, gas • Cramping • Diarrhea • Electrolyte imbalance • Nausea, vomiting 	<ul style="list-style-type: none"> • Liquid that is taken with at least 8 ounces of water • Rectal enema • Tablet 	5 minutes Enema: 6 hours
Stimulant Laxatives	<ul style="list-style-type: none"> • Sennosides (Senokot®) • Bisacodyl (Dulcolax®) 	Increases the muscle contractions that move stool through the GI tract	<ul style="list-style-type: none"> • Cramping • Nausea • Sennosides may turn urine reddish-brown • Weakness 	<ul style="list-style-type: none"> • Chewable tablet • Enema • Liquid • Suppository • Tablet 	6 to 24 hours Enema: 5 to 20 minutes Suppository: 20 to 60 minutes
Stool Softeners	<ul style="list-style-type: none"> • Docusate sodium (Colace®) 	Adds more fluid and fat to stool to make it easier to pass	<ul style="list-style-type: none"> • Cramping • Diarrhea 	<ul style="list-style-type: none"> • Capsule or tablet • Liquid - Mix with milk or fruit juice to avoid throat irritation • Rectal enema 	12 to 72 hours Enema: 2 to 15 minutes

Constipation Risk Assessment Tool

Learn about your risk for constipation by answering the Constipation Risk Assessment Tool.

Directions: For questions 1 and 2, answer by checking Yes or No. For questions 3 through 18, write a number in the score box next to the question. Add the numbers to find your constipation risk score and write it down.

Risk Factor	Score
1. Do you believe that you easily become constipated? Yes No	
2. Do you take laxatives to relieve constipation? Yes No	
3. Do you have problems having a bowel movement when you are away from home? Yes = 2 No = 0	
4. Are you? Male = 1 Female = 2	
5. How mobile are you? <ul style="list-style-type: none">• Walk independently = 0• Need a cane, walker or help from others to walk = 1• Restricted to a bed or chair = 2• Bed bound = 3	
6. How many servings of fiber, fruits and vegetables do you eat each day? <ul style="list-style-type: none">• 2 servings or less = 2• 3-4 servings = 1• 5 servings or more = 0	
7. Do you eat bran products, like bran cereal, every day? Yes = 0 No = 2	
8. How much fluid do you drink each day? <ul style="list-style-type: none">• 10 glasses (8 ounces each) or more = 0• 6-9 glasses (8 ounces each) = 1• 5 glasses (8 ounces each) or less = 2	
9. Have you been told that you have depression? Yes = 2 No = 0	
10. Have you been told that you have dementia or a learning disability? Yes = 2 No = 0	
11. Do you have a metabolic disorder, such as low potassium levels, high calcium levels or kidney problems? Yes = 2 No = 0	
12. Do you have a tumor in your rectum or ovary or have you had surgery in your pelvic (hip) area? Yes = 3 No = 0	
13. Have you had a stroke or do you have a neuromuscular disorder, such as multiple sclerosis, a spinal cord compression or Parkinson's disease? Yes = 3 No = 0	
14. Do you have diabetes or take thyroid medicine? Yes = 3 No = 0	
15. Do you have a lot of cancer in your belly or have adhesions, hemorrhoids, irritable bowel syndrome, any type of prolapse or have been told that you have an ileus? Yes = 3 No = 0	
16. Are you currently taking these medicines? <ul style="list-style-type: none">• Anti-depressants = 2• Anti-inflammatory medicine = 3• Anti-nausea medicine, such as ondansetron/Zofran® = 2• Anti-seizure medicine = 2• Calcium channel blockers = 2• Iron supplements = 2• Pain medicine (opioids) = 5• Parkinson's disease medicine = 2 Add total and write in box	
17. Are you taking one of these constipating chemotherapy medicines? <ul style="list-style-type: none">• Vincristine• Vinblastine• Thalidomide Yes = 5 No = 0	
18. Are you receiving other constipating cancer treatments as explained by your health care team? Yes = 3 No = 0	
<hr/>	
Total Score	
Score Chart	
<ul style="list-style-type: none">• 10 or less = Low risk for constipation• 11-15 = Moderate risk for constipation• 16 or greater = High risk for constipation	
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What does your score mean?

Low Risk for Constipation – Learn more about managing symptoms that may be caused by cancer treatment. Ask your care team for more information.

Moderate Risk for Constipation – Show your care team your score and ask if a bowel maintenance program is right for you.

High Risk for Constipation – Show your care team your score and ask them to check your bowel. Your care team can give you information about how to treat and prevent constipation.

Diarrhea

Diarrhea is the passing of loose, liquid stool more than 3 times per day.

Causes

- Anxiety
- Food allergies
- Foods and drinks high in fat and sugar
- Fried and spicy foods
- Increasing your daily intake of fiber too quickly
- Infections or parasites in the GI tract
- Inflammatory bowel disease, called IBD
- Irritable bowel syndrome, called IBS
- Medicines and medical treatments

Medicines and Medical Treatments That May Cause Diarrhea

- Chemotherapy and other medicines
- Certain surgeries
- Radiation treatment to the abdomen and pelvis area

Some nutrition drinks can upset your stomach, especially the ones that are very rich or high in fat. If they cause diarrhea, try lighter or lower-fat options.

Symptoms

- Loose, liquid stools
- More bowel movements than normal
- Nausea
- Pain in the belly
- You are unable to hold back a bowel movement

If you have diarrhea and do not know why, talk to your doctor or nurse. Your treatment will vary depending on the cause of the diarrhea. It is important to treat the cause, not the symptom.

Preventing Diarrhea

- If milk or dairy upsets your stomach, choose lactose-free options. You can also take a lactase pill that you can buy without a prescription at drug and grocery stores.
- Avoid foods that contain known allergens.
- Avoid drinking hot liquids when you have diarrhea.
- Wash all fresh fruits and vegetables before eating.
- Drink no more than 4 to 8 ounces of fluids with meals. Try sipping liquids throughout the day rather than drinking large amounts in a short time period.



- Add **probiotic foods** to your diet. Probiotics are made of good bacteria and yeast. The good bacteria help fight off issues caused by bad bacteria, like problems with digestion and bowel function. Taking probiotics may help to balance out the bacteria in your stomach and can help you feel better. These foods naturally contain probiotics:

- Buttermilk
- Kefir: A yogurt-like drink
- Kombucha tea
- Sauerkraut
- Yogurt with live cultures

Discuss taking probiotics with your care team before adding them to your diet.



For diarrhea: Name brand and generic anti-diarrhea medicine

- Some antibiotics can reduce good bacteria in your gut. To help protect healthy bacteria, eat yogurt with live cultures or small servings of kefir 2 times a day while you take antibiotics. Eat them at least 2 hours before or after your medicine so the antibiotic does not destroy the good bacteria in the food. Ask your care team if probiotics are safe for you while taking antibiotics.
- If you will have radiation treatment, chemotherapy or surgery, ask your doctor for a consultation with a dietitian.

Treating Diarrhea

- Stop taking any medicines that can cause diarrhea, like stool softeners and laxatives.
- Add foods to your diet that slow the movement of stool in the GI tract, like those in the BRAT diet: banana, rice, applesauce and toast. These foods help reduce the number of stools.
- Avoid fried and spicy foods.
- Avoid drinking hot liquids like soup, broth, tea and coffee. Instead, drink them warm or cold.
- Medicinal fiber can help with diarrhea if taken with a small amount of fluid. Ask your doctor, pharmacist or dietitian for instructions.
- Eat small, frequent meals to help slow movement in the GI tract.
- Ask your care team about taking non-prescription anti-diarrhea medicine, like loperamide (Imodium®). This medicine is most often the first treatment. Unless you receive other instructions, **do not** take more than 16 milligrams per day.
- If you still have diarrhea after taking 16 milligrams of loperamide, tell your care team.
- The combination medicine atropine and diphenoxylate (Lomotil®) is an anti-diarrhea prescription medicine. Your doctor may prescribe this for you.
- Tell your care team if your diarrhea continues or if you have a fever of 100.4°F (38°C) or higher.
- It is important to prevent fluid loss from diarrhea.



Dehydration

Fluid loss due to diarrhea may cause dehydration and electrolyte imbalances. Call your care team if you have:

- More than 3 loose bowel movements in a day even after taking anti-diarrhea medicines as directed.
- Diarrhea and a fever or chills.
- Decreased urination or dark-colored urine.
- Dizziness or weakness.
- Dry mouth.

MD Anderson Resources

Your care team can help you with bowel management questions. They can refer you to other resources in MD Anderson, like a dietitian or the Supportive Care Clinic.

The Learning Center

MDAnderson.org/TLC

The Learning Center is a patient education library with current and reliable information on cancer prevention, treatment, coping and general health.

- Theodore N. Law Learning Center, Main Building, Floor 4, Elevator A, 713-745-8063
- Levit Family Learning Center, Mays Clinic, Floor 2, near Elevator T, 713-563-8010

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