Constipation: Self-Help for Severe Constipation

This information will help you learn how to pass body waste (stool) from your colon and help relieve severe constipation.

Laxatives by Mouth

If you have a large amount of stool in your bowel, you may need to take a non-stimulant laxative by mouth (such as magnesium citrate or lactulose) to help push stool down from the top of your colon.

Magnesium citrate (10 ounce bottle) can be purchased over-the-counter in any pharmacy or drug store. Pour it over ice and drink it within 30 minutes. If you do not pass a large amount of stool, you may repeat the same dose of magnesium citrate the next day. Do not use magnesium citrate if you have kidney problems (increased BUN and creatinine levels).

Lactulose, usually prescribed in a 30 cc dose, can be taken every 4-6 hours. It is important to drink 8 ounces of water with each dose of lactulose. Having more gas is usually a side effect of lactulose. If you have more gas than usual or your belly is bloated, stop taking lactulose and call your nurse or doctor. Lactulose is safe to take if you have kidney problems.

If you are nauseated, take 1-2 enemas and then start the laxatives by mouth.

If you have symptoms of a bowel obstruction, do not take a laxative or an enema without advice from your doctor. A bowel obstruction occurs when something is blocking your intestines. Symptoms of a bowel obstruction can include:

- Loss of appetite and/or inability to eat
- Vomiting
- Abdominal pain and swelling
- No bowel movement for several days along with the above three symptoms

Enemas

Fleet® Mineral Oil Enema

If you feel that your stool is hard, a Fleet® mineral oil enema may help. Fleet enemas can be purchased at any pharmacy. The oil in the enema will coat your intestines and colon and soften hard stool. This treatment works best when the enema goes higher in the colon and remains there for a period of time. To do this, give yourself the enema by squeezing quickly with a lot of pressure. This way it goes up higher and you will be able to hold it better. Do not sit on the toilet and try to have a bowel movement. The enema is meant to be retained, unlike other enemas that are passed quickly.
Powdered Milk and Molasses Enema
A powdered milk and molasses enema is a comfortable enema and is the best treatment for severe constipation. This enema can be repeated 4 times a day (as close as 2 hours apart), or as directed by your nurse or doctor. Repeat until you have eliminated all of the formed stool and the stool turns to liquid. Then, stop the enemas and any laxatives you are taking by mouth.

You can give yourself this enema without help from another person. See the instructions below.

- Do not use an enema if you are on chemotherapy and your platelet count is below 50,000.
- If you have taken a Fleet mineral oil enema, give yourself the milk and molasses enema 1 hour after the Fleet enema.

Supplies for Enema
- Enema bag from the hospital. Your nurse can help you get the enema bag from the hospital. If you are unable to come into MD Anderson, ask your local health care provider where you can find an enema bag in your area like the ones that are used in hospitals. They have long flexible tubing attached as part of the bag with a clamp on it. These bags are disposable, but can be re-used many times. Remember to clean the bag with soap and water between uses.
- Lubricant (such as Vaseline® or K-Y® Jelly)
- Plastic trash bag or waterproof pad
- Powdered milk and molasses enema mixture (recipe below)

Recipe
6 ounces (3/4 cup) hot water
3 ounces powdered milk (do not use cow’s milk)
4.5 ounces (2/3 cup) molasses

You may purchase powdered milk and molasses at any grocery store. If you are staying in a hotel or do not have transportation to a grocery store, ask your doctor for a prescription for the milk and molasses enema. The hospital pharmacy will fill the prescription for you.

1. Put the water and powdered milk in a container. Stir it until the water and milk look fully mixed.
2. Add the molasses. Stir again until the mixture appears has an even color.

Preparing Enema Bag
1. Close the clamp on the tube.
3. Pour the milk and molasses mixture into the bag.
4. Remove air from the tube by opening the clamp and allowing the mixture to completely fill the tube. To prevent the mixture from leaking from the bag, raise the end of the tube higher than the bag and lower it gradually.
5. Close the clamp after filling the tube.

Procedure
1. Gather your supplies and wash your hands.
2. Spread the plastic bag or waterproof pad onto a bed near a bathroom. This is where you will give yourself the enema.

3. Hang the enema bag on a coat hanger, doorknob or on a hook. You may also ask someone to hold the bag for you. Do not hang or hold the bag more than 12 inches above your hips. Mark the enema tube with a pen or marker at 12 inches so you know how far to insert it.

4. Lubricate the tip of the tube on the enema bag with lubricant. New bags come with the tip pre-lubricated. When preparing a bag that you have used before, always lubricate the tip again.

5. On the bed, lie down on your left side.

6. Gently insert the tube about 12 inches into the rectum or until you feel resistance. Do not force the tube. If you feel resistance before the tube is in 12 inches, withdraw the tube and release the solution slowly. You may be able to insert the tube to 12 inches when you give yourself the next enema.

7. When the tube is in about 12 inches, turn over on your right side.

8. Release the clamp on the tube slowly to allow the mixture to flow into your colon.

9. Take slow deep breaths through your mouth to help relieve discomfort.

10. When all of the mixture is released or when you have a full feeling, clamp the tube. You should be able to hold the entire mixture (about 1 ½ cups).

11. Continue to lie on your right side, leaving the clamped enema tube in place for 20 minutes. This allows the solution to travel down the length of your colon and soften the stool.

12. Remove the enema tube and sit on the toilet.

13. Clean the enema bag with soap and water and save for the next use.

Repeat this enema up to 4 times a day, until you have passed a lot of stool and it becomes liquid, like colored water. This is a sign that you have no more formed stool in your colon. If you are taking magnesium citrate to help relieve constipation, stop taking this medicine when you stop the enemas.

**Setting Goals for Frequency of Bowel Movements**

Once you are no longer constipated, follow these guidelines to help establish a normal bowel pattern:

- If you eat your regular amount of food per day, expect to have a bowel movement every day.
- If you eat half your regular amount of food, expect to have a bowel movement every other
day.

- If you eat one-third your regular amount of food, expect to have a bowel movement every third day.
- If you do not have a bowel movement by 4 p.m. on the expected day, drink 4 ounces of prune juice at room temperature (if the juice is refrigerated, warm it for 30 seconds in a microwave). Next, drink 8 ounces of a hot liquid. If you do not have a bowel movement by bedtime, take a laxative. You can take either take 2 caplets or 2 tablespoons of milk of magnesia with 8 ounces of water or as directed by your doctor or nurse. If you do not have a bowel movement after breakfast the next day, repeat the milk of magnesia dose every 6 hours until you have a bowel movement. Do not take magnesium products if you have kidney disease.

**Points to Remember**

- The key to managing severe constipation is **prevention**.
- Drink at least 2 quarts of fluid a day.
- Eat 25-40 grams of fiber a day, unless you are on a low-fiber diet. Fluid and fiber help with regular bowel movements.
  - 1 cup of General Mills Fiber One® cereal (noodle type) contains 28 grams of fiber.
    - Adding a small amount of fruit to 1 cup of Fiber One will help you have regular bowel movements.
  - If you need help with your diet, ask about visiting with the dietitian assigned to your clinic or call the Department of Clinical Nutrition at 713-563-5167.
- To help you establish regular bowel movements, you may benefit from a maintenance bowel regimen or a bowel training program. Ask your nurse for more information.

You may benefit from a visit with a dietitian or someone in the Supportive Care Clinic. Ask for a referral.