



CONSTIPATION

No one talks about it but around 15 per cent of New Zealanders have chronic constipation and very few of them seek help. It is not a very sexy topic to talk about but it is certainly a very frustrating problem for a large proportion of the population. It occurs more commonly in women and older people, and these people have a much lower quality of life.

As people get older various things happen to them that predispose them to be at risk of chronic constipation. One of the main causes is drugs, virtually any of which can cause constipation. These include medicines for blood pressure, migraine, cold and flu tablets, antacids, heart drugs, antidepressants, anti-epileptic medicines, diuretics, cough suppressants, some antibiotics and cholesterol lowering drugs.

There are also numerous medical problems that cause constipation and it is extremely important to be aware of the recent onset of a change of bowel habit. A recent change in bowel habit can be associated with a cancer anywhere in the bowel and must be checked on with your family doctor immediately.

Other health conditions that cause constipation include an underactive thyroid - many people are running slow thyroids but their doctors are telling them that because their blood test is normal that they don't have a problem with their thyroid. What many have forget is that the tests that we look at from the laboratory do not give us all the information that can help make a full diagnosis.

When in doubt doctors must look at the patient and listen when they tell you that they are constipated, tired and cold.

Undiagnosed coeliac disease (an autoimmune disease that is associated with an immune reaction in the body to gluten in the diet) can cause constipation. Undiagnosed food sensitivity can also be a cause - many people will find that giving up dairy cures their constipation. Some people with certain health conditions like lupus, multiple sclerosis, Parkinson's disease and vitamin B deficiency also find that constipation is the outcome.

A special category of older people who drink a lot of milk and have a lot of antacids, end up getting a condition called milk alkali syndrome. They can become quite unwell with this because these dietary additions cause the body to become more alkaline and also causes constipation, along with fatigue, depression, confusion, nausea, vomiting, abdominal pain and headache.

Although I, and many of my colleagues, have been telling our patients to drink more, exercise more, and have fibre, it appears that recent research only endorses fibre as a useful intervention.

The best form of fibre is psyllium which can be bought commercially in containers from the chemist or at health shops or organic shops. The way psyllium works is by improving stool consistency by drawing in some water, thus allowing the bowel to work a little bit better and improve frequency. However it must be taken with a lot of water to avoid blocking the oesophagus.

Stool softeners do not work well and stimulants like senna are good for episodic constipation but are not a long term treatment. Lactulose and magnesium draw water into the bowel and can help as a second line therapy behind psyllium.

In addition, probiotics which balance the bowel flora have been found in research to be helpful.

If constipation is associated with irritable bowel syndrome (bloating, nausea, abdominal pain, etc.) then stress management and counselling can be helpful as well. For emergencies at home, you can buy glycerine suppositories, or a small liquid enema that you can self administer - these are available from a pharmacy. On rare occasions the problems can be due to a mechanical pelvic floor dysfunction and in these situations surgery can sometimes be necessary.

In summary:

There can be many hidden causes to chronic constipation and it's important to remember that a recent change in your usual pattern of bowel activity needs to be checked with your doctor in case it's something serious.