Managing Constipation

Managing constipation from opioids (pain medicine)

Constipation happens when a person has hard stools that are uncomfortable and happen less often than normal. The main goal of treating constipation is to make sure going to the bathroom is as comfortable as possible. It's also important to have regular bowel movements. Some people go to the bathroom many times a day, while others go a few times a week. Both are okay as long as it feels comfortable.

Constipation happens more often when someone takes opioids, a type of pain medicine. This is a common side effect and happens to almost everyone taking opioids. To help prevent constipation, a laxative (medicine that helps you go) should be started as soon as the pain medicine is prescribed. Your doctor or nurse will talk to you about this.

Signs and symptoms of constipation

- Straining (pushing hard) to go to the bathroom
- Less frequent or hard stools
- Feeling like you didn't finish going
- Swelling in your stomach
- · Cramping, nausea (feeling sick), vomiting, or heartburn
- Small, watery, or smeary stools

What can you do to help with constipation?

• If you're taking opioids, you should try to have a comfortable bowel movement at least every couple of days.



PATIENT AND FAMILY EDUCATION

- Stool softeners and laxatives (medicines to help you go) can treat constipation. It's important to start taking them when you first begin using pain medicines. Your doctor might change the medicine to find what works best for you.
- Drink 8 glasses of fluid a day if you can.
- Eat fruits and vegetables.
- Let family, friends, and the care team help you. Drink warm drinks, like tea, after meals to help your bowel move.
- Try to walk or sit up after meals.
- Train your bowels by sitting on the toilet at the same time each day.

What should you tell your care team?

Talking about constipation can feel awkward, but it's important for your comfort and health.

- Keep track of your bowel movements (BM). Write down the day and time.
- Describe what the stool looked like. Was it hard? Did you feel any pain, dizziness, blood, or burning while going?
- Tell them if your bowel movements happen less or more often than usual.
- Let them know if the stool changed in size, shape, or if it became watery.
- If you feel the urge to go but can't, or if you feel pressure in your bottom.
- If you notice a change in how much gas you pass.
- Constipation can get worse if you aren't drinking enough fluids. Let your care team know if this is happening, as they can help.
- Always tell your doctor or nurse if you are taking any over-the-counter medicine, or if you've had a change in your medicines since your last visit.
- Report any stomach problems like bloating, cramping, nausea, vomiting, gas, or heartburn.



PATIENT AND FAMILY EDUCATION

• If you have trouble going to the bathroom, like straining, not fully passing stool, or if you have hemorrhoid pain or bleeding.

| BOWEL MOVEMENT RECORD | | | |
|-----------------------|--|---|---|
| DATE and TIME | STOOL CONSISTENCY Was it hard, soft, or liquid? | ABDOMINAL SYMPTOMS Was there any bloating, cramping, nausea, vomiting, or heartburn? | DIFFICULTIES WITH PASSING STOOL Was there straining, incomplete passage of stool, diarrhea, or bleeding? |
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