

Healthy bowel guide Information for patients











Welcome

It is normal to open your bowels from between three times a day to three times a week.

If you need to strain excessively, do not feel completely empty or have to help the stool out, you may be constipated or you may be experiencing faecal incontinence.

There are many causes of constipation. Our busy, modern lifestyles may be responsible for most cases of constipation with contributing factors such as not eating enough fibre or drinking enough water, not getting enough exercise, and not taking the time to respond to an unmistakable urge to go to the toilet.

However, emotional and psychological problems can also contribute to the problem, as can long-term health conditions; including irritable bowel syndrome, colorectal cancer, diabetes, Parkinson's disease, multiple sclerosis, an under-active thyroid gland and depression.

This leaflet gives you information on how to help keep your bowel healthy.

What are the symptoms of constipation?

- Hard, compacted stools that are difficult or painful to pass
- Straining during bowel movements
- No bowel movements in three days
- Stomach aches that are relieved by bowel movements
- Leaks of wet, almost diarrhoea-like stools between regular bowel movements.

You can use the Bristol Stool Chart opposite to monitor what you are passing. An ideal stool is type 3 or 4.

Bristol Stool Chart

Type 1

Separate hard lumps, like nuts (hard to pass)



Type 2

Sausage shaped but lumpy.



Type 3

Like a sausage but with cracks on its surface



Type 4

Like a sausage or snake, smooth and soft.



Type 5

Soft blobs with clear-cut edges (passed easily).



Type 6

Fluffy pieces with ragged edges, a mushy stool.



Type 7

Watery, no solid pieces. Entirely liquid. People sometimes feel unable to open their bowels at school or in their workplaces. Others even feel inhibited in their own homes. Over the years, their gastrointestinal tract gradually slows down and they become constipated.

A lot of factors can influence your bowel habits:

- Some people feel unable to relax enough to open their bowels in public places, or even at home
- Women often experience a change in their bowel habit due to their menstrual cycle
- A change of routine, such as being on holiday with a different diet and time zone, or a change in environment, such as using sharing facilities, can affect your bowel habits.

So what can I do?

Step 1: Lifestyle

It is important to try to make time for your bowels each day. Most bowels respond best to a regular habit. About 30 minutes after eating is the most likely time for the bowel to work. This is because of the 'gastro-colic response' which means that eating sets waves of activity in motion in the bowel.

Try not to rush going to the toilet. If you have a tendency to be constipated, set aside about ten minutes in the toilet. Preferably this should be at a time when you are not rushing to do other things. Find a toilet that you feel comfortable to use and where you do not feel inhibited by lack of privacy or time.

Step 2: Medication

If you are taking any medicines (prescribed or bought from the chemist) ask your doctor or chemist if they could be contributing to your constipation. If possible, try to remove constipating medications.



Step 3: Correct positioning

It is important not to ignore the feeling that you need to open your bowels. Make sure you have enough time and sit correctly on the toilet

- Firstly, make sure you are comfortable on the toilet. It is most-natural for humans to squat to pass a stool. You may find that having your feet on a footstool, about 20-30cm (eight to ten inches) high helps by improving the angle of the rectum within the pelvis and making it easier to pass stools. Keep your feet 1.5 2 feet apart.
- Relax and breathe normally. Do not hold your breath as this will encourage you to strain.
- Tighten your abdominal muscles.
 You should feel them push forwards and sideways. This is called the brace.
- Concentrate on relaxing the anus (back passage) to allow the stool to pass. Do not push from above without relaxing the anus below.

Step 4: Fluid intake

Try to drink at least 1.5 litres (six to eight cups) of fluid per day, unless advised otherwise by your doctor as the body may become dehydrated if it is not replaced. Dehydration can result in constipation. Try to limit the amount of coffee and alcohol you drink as this can irritate the bowels as well as causing dehydration.

Step 5: Fibre intake

Eating regularly is the best stimulant for your bowels. Skipping meals, especially breakfast, can lead to a sluggish or irregular bowel habit. Contrary to popular belief a high fibre diet is not always the best diet for people who suffer from constipation. Regular meals and an adequate fluid intake are more important.

Too much fibre can lead to an increase in bloating and discomfort. If you do feel your diet is short on fibre, try to use fruit and vegetables (soluble fibre) rather than cereals (insoluble fibre) as they are less bloating.

Be careful not to eat excessive amounts of fibre as this could lead to loose bowel motions that are difficult to control. Some foods can act as natural laxatives in some people, such as liquorice, chocolate, prunes, figs and spicy food.

Step 6: Keep active

Exercise can help to improve bowel habits as it helps to stimulate the bowel to work regularly but be careful not to overdo it. If you lead a very inactive lifestyle (driving to work at a desk job) even taking a regular walk at lunchtime can make a difference.

There are specific exercises for your sphincter and pelvic floor that may help to improve both bowel function and control.

Exercises

Anal sphincter exercises focus on tightening the muscles around the anus (back passage).

The following exercises are beneficial if you are experiencing any leakage from the bowel or finding it difficult to empty the bowel:

- Tighten the muscles as if you are trying to stop wind from escaping
- Hold for the count of five seconds and relax
- Repeat this ten times, three times a day.

Other options

If you have tried all the steps in this leaflet and you are still having problems with your bowels, you may need to try using laxatives, suppositories or mini-enemas. Your nurse can discuss this with you.

Tell us we're listening!

Our staff want to know how they are doing. Tell us what you think at: www.cnwl.nhs.uk/feedback and then we'll know what we have to do.

Contact us

Hillindon and Harrow Adult Bladder and Bowel Service

Tel: 01895 485100



This document is also available in other languages, large print, Braille, and audio format upon request. Please email **communications.cnwl@nhs.net**

هذه الوثيقة متاحة أيضاً بلغات أخرى والأحرف الطباعية الكبيرة وبطريقة برايل للمكفوفين وبصيغة سمعية عند الطلب

این مدرک همچنین بنا به درخواست به زبانهای دیگر، در چاپ درشت و در فرمت صوتی موجود است. Farsi

এই ডকুমেন্ট অন্য ভাষায়, বড় প্রিন্ট আকারে, রেল এবং অভিও টেপ আকারেও অনুরোধ পাওয়া যায় Bengali

Dokumentigaan waxaa xitaa lagu heli karaa luqado kale, daabacad far waawayn, farta indhoolaha (Braille) iyo hab dhegaysi ah markii la soo codsado. **Somali**

Mediante solicitação, este documento encontra-se também disponível noutras línguas, num formato de impressão maior, em Braille e em áudio.

Portuguese

நீங்கள் கேட்டுக்கொண்டால், இந்த ஆவணம் வேறு மொழிகளிலும், பெரிய எழுத்து அச்சிலும் அல்லது ஒலிநாடா வடிவிலும் அளிக்கப்படும்.

Tamil

Este documento también está disponible y puede solicitarse en otros idiomas, letra grande, braille y formato de audio.

Spanish

Dokument ten jest na życzenie udostępniany także w innych wersjach językowych, w dużym druku, w alfabecie Braille'a lub w formacie audio. **Polish**

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Gujurati

Be belge istenirse, başka dillerde, iri harflerle, Braille ile (görme engelliler için) ve ses kasetinde de temin edilebilir.

Turkish

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