## Critical Care Directorate

## GUIDELINES FOR TREATMENT OF CONSTIPATION

**AIM:** The comfortable passage if soft- formed stool at intervals of no more than three days.

**ON ADMISSION** 1: Establish prior bowel history and any regular prescription.

2: If post surgery, determine if a pre-surgery bowel preparation had been prescribed.

## **FACTORS TO CONSIDER:**

Feeding: If on TPN constipation unlikely unless constipated pre-admission.

If enterally fed aim for normal bowel habit. This may not be appropriate if on an elemental feed.

Medical condition: In neurological conditions predisposing atonic gut consider prophylactic laxatives:

Senna 10ml (2 tablets) Sunday, Tuesday, Thursday.

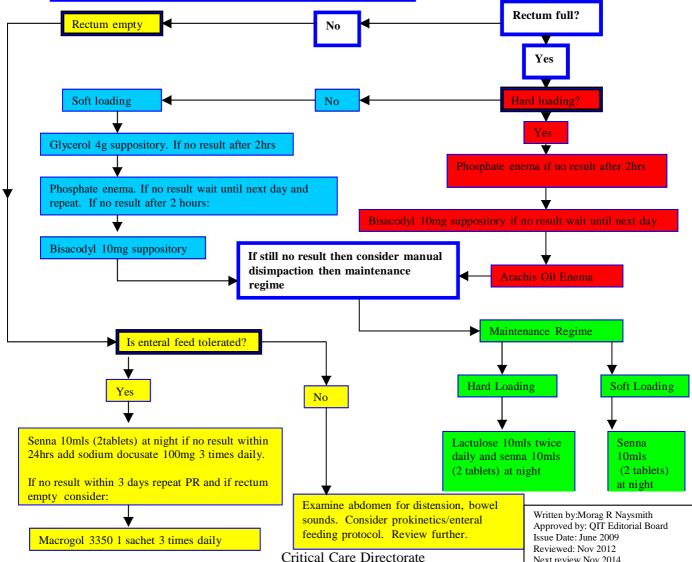
Glycerol 4g suppository Monday, Wednesday, Friday morning.

Lactulose 10mls twice daily.

If post-abdominal surgery/trauma then discuss bowel management with the surgeons.

Review constipating drugs.

Caution: Review appropriateness of laxative prescriptions if signs or symptoms of obstruction. If no bowel movement 72hrs post admission after factors PR examination considered



Next review Nov 2014