Patient Education



Making Cancer History*

Bowel Management When Taking Pain or Other Constipating Medicine

How Medicines Affect Bowel Function

Pain medication and some chemotherapy and anti-nausea medicines commonly cause severe constipation. They affect the digestive system by:

- Slowing down the movement of body waste (stool) in the large bowel (colon).
- Removing more water than normal from the colon.

Preventing Constipation

Before taking opioid pain medicine or beginning chemotherapy, it is a good idea to clean out your colon by taking laxatives of your choice. If you have not had a bowel movement for five or more days, ask your nurse for advice on how to pass a large amount of stool from your colon.

After beginning treatment, you can prevent constipation by regularly taking stimulant laxatives and stool softeners. These will counteract the effects of the constipating medicines. For example, Senna (a stimulant laxative) helps move stool down in the colon and docusate sodium (a stool softener) helps soften it by keeping water in the stool. Brand names of combination stimulant laxatives and stool softeners are Senna-S[®] and Senokot-S[®]. The 'S' is the stool softener of these products.

You can safely take up to eight Senokot-S or Senna-S pills in generic form per day. Start at the dose advised by your nurse. Gradually increase the dosage until you have soft-formed stools on a regular basis. Do not exceed 500 milligrams (mg) of docusate sodium per day if you are taking the stool softener separate from Senokot-S or Senna-S generic.

Stool softeners, stimulant laxatives and combination products can be purchased without a prescription at drug and grocery stores. Many store brand stimulant laxative/stool softeners work as well as brand names but cost less.

If the doctor increases your pain medicine, gradually increase your intake of stool softener and stimulant laxative to keep your stool soft and formed. Do not let your stool become hard and difficult to pass.

Be sure to drink plenty of liquids, at least eight to12 cups daily. Focus on water and other decaffeinated beverages.

Relistor®

If you are on opioids, and taking eight Senna-S pills and MiraLAX[®] daily and are unable to have a bowel movement, talk to your doctor about Relistor. This is a prescription medicine that helps you have a normal bowel movement. Relistor is an injectable medicine that you give yourself every other day. Your health care team will teach you how to do this.

Treating Unresolved Constipation

To treat unresolved constipation, you need to empty the formed stool in your colon. If you are taking constipating medicine and have not had a bowel movement for three or more days, clean out your colon as directed by your nurse.

Do not use an enema if you have symptoms of a bowel obstruction. This means that something could be blocking your small intestine or colon. If you have symptoms of a bowel obstruction, do not take a laxative without advice from your doctor or nurse. Symptoms of a bowel obstruction include:

- Loss of appetite.
- Vomiting.
- Abdominal pain.
- Abdominal swelling.
- No bowel movement for several days along with one or more of the other symptoms.

Report any of these symptoms to your doctor or nurse.

If you are on chemotherapy and your blood counts are low, bleeding may occur. If you are taking chemotherapy and need help with constipation, ask your nurse or doctor for more information.

Frequency of Bowel Movements

Once you have cleaned out your bowel, try to determine how often you should have a bowel movement. As described below, your frequency of bowel movements depends on how much food you take in:

- If you eat your regular amount of food per day, expect to have a bowel movement every day.
- If you eat one-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 day you expect, take four ounces of prune juice followed by a hot liquid. If you do not have a bowel movement by bedtime, take two tablespoons or two caplets of milk of magnesia with eight ounces of water every six hours or until you have a bowel movement.

If you do not a have bowel movement after breakfast the next day, repeat the dose of milk of magnesia. Do not take milk of magnesia if you have kidney problems.

If you have to keep taking milk of magnesia, your maintenance bowel program is not strong enough. You may need to increase your dosage of Senna-S. Ask your nurse or doctor for instructions.

If taking the maximum dose of eight Senna-S pills per day is not helping you to have a bowel movement, try mixing 17 grams of MiraLAX in eight ounces of water and drink this each day. If this does not help bring on a bowel movement, contact your nurse. MiraLAX is a laxative that is available without a prescription at most pharmacy and grocery stores.



Promoting Regular Bowel Movements

Drink at least eight, eight ounce glasses (two liters) of non-alcoholic fluid per day. Half of the fluids you take in each day should be non-caffeinated.

Take medicines as directed by your doctor or nurse. Follow their advice on preventive measures when taking medicines that cause constipation.

Eat one cup of General Mills Fiber One[®] cereal (the noodle type) daily. One cup provides 28 grams of fiber and may be substituted for medicinal fiber (described below).

Take fiber as a medicine to control stool consistency and frequency. Once a day, take 6.8 grams of psyllium (brand name Metamucil[®]) or methylcellulose (brand name Citrucel[®]) mixed in eight ounces of water. Then immediately drink eight more ounces of fluid.

Avoid alternating between constipation and diarrhea.

It is very important to have bowel movements regularly while you are on chemotherapy to help keep your stools soft and formed.

Contact your nurse, doctor or pharmacist if you have problems or questions.

