



PREVENTING CONSTIPATION

The pelvic floor is made up of a network of muscles and nerves which control both bladder and bowel function. Good bowel habits help to protect these muscles and minimise the risk of both bladder and bowel incontinence.

How many times a day should I be using my bowels?

Normal bowel habits vary considerably from person to person. Anything from several times a day to several times a week can be quite normal. It is the consistency of the stools rather than the frequency that is more important. The stool should be soft and easy to pass.

What is constipation?

Constipation is when stools become hard and dry, are difficult to pass and require 'pushing' or 'straining'. Constant straining or pushing to open your bowels can weaken the pelvic floor muscles. You may also experience bloating, wind and abdominal pain. Constipation can be caused by not eating enough fibre, not drinking enough fluid, not getting enough exercise or poor toileting habits

How can you prevent constipation?

Eat plenty of high fibre foods

Fibre, which is the roughage in plant foods, increases the bulk and softness of stools, making them easier to pass.

Include fibre from a variety of foods, such as:

- all fruits and vegetables (leave skins on if possible)
- wholemeal and wholegrain bread
- high fibre breakfast cereals such as muesli, Allbran, Guardian, Healthwise, Bran Plus etc.
- dried beans such as baked beans, kidney beans, split peas
- dried fruit, nuts
- grains such as oats, barley, brown rice and wholemeal flour
- prunes work well for some people as they contain a substance that stimulates the bowel. Start with about six prunes or 1/2 cup of prune juice
- natural fibre supplements such as psyllium.

Drink plenty of fluid

Fibre works best by absorbing fluid. Drink at least seven or eight glasses a day (1.5 to 2 litres per day). All fluids count, but water is the best!

Get plenty of exercise

Exercise helps to stimulate the muscles in the bowel and promote regular bowel habits. Be as active as you can and enjoy some daily exercise such as walking.

Be aware of other factors which may exacerbate constipation

Some medications may cause constipation. It is always wise to ask your doctor when medications are prescribed if they have side effects.

Medical conditions such as diabetes, depression, neurological problems or, an abrupt change in exercise such as when you have an operation may also lead to changes in bowel habit.

Remember

You should see a doctor if:

- your constipation does not respond to these simple changes: or
- there is blood in your stools.

Normal bowel emptying

Emptying the bowel is called defecation. Defecation involves the co-ordination of pelvic floor and abdominal muscles, colonic (bowel) activity, comfort and positioning.

It is normal to have control over when the bowel is emptied. The bowel should evacuate easily, that is without straining or applying manual pressure or support in the vagina or rectal area. The stool/bowel action should be soft and easy to pass.

If you are having difficulty emptying your bowel it may be due to one of the following:

- constipation
- no 'message to go' - or not feeling the urge to go because of a problem with the nerves in the anal sphincter
- a problem with the muscles in the pelvic floor or anal sphincter.

Sometimes these problems are made worse by repeated straining, pelvic floor muscle weakness or an inability to release the anal sphincter.

How to help the bowel to empty

Don't ignore the urge to empty the bowel. It is best to empty the bowel soon after the urge to empty is felt. This often happens about twenty minutes after eating a meal, especially after breakfast. Eating and drinking, especially a hot drink at breakfast stimulates activity further down the digestive tract.

Take your time when emptying the bowel. Try not to rush the natural process of emptying the bowel. Defecation is an important aspect of gastro-intestinal and pelvic floor health. It is worth allocating several minutes from the day to ensure proper emptying.

Toilet position

- A 'seated squat' position improves rectal emptying.
- Using a footstool, sit in a leaning forward position with feet apart and forearms on thighs. Keep the back straight (see diagram). This position helps to relax the muscles in the pelvic floor and anus which is important for easy emptying.



- To help avoid straining, relax the abdominal or tummy muscles by making a conscious effort to bulge them out. This is further helped by opening the mouth and breathing out.
- Keep the pelvic floor muscles strong. It is wise to exercise the pelvic floor. If you need more information ask for our fact sheet Pelvic Floor Exercises or ask for help from someone who has training in this area (e.g. continence physiotherapist or continence nurse).

Occasionally good diet and exercise habits are just not enough and you may need some extra help such as a laxative. Care should be taken to use laxatives appropriately. Ask your doctor or continence advisor for help.

If you experience complications after you leave hospital please see your local doctor or you may attend the emergency department at the Royal Women's Hospital or your closest emergency department.

For more information and advice

If you are a patient at the Women's
Urogynaecology Pelvic Floor Service
 Continence Nurse Advisor
 The Royal Women's Hospital
 Tel: (03) 8345 2000

Related fact sheets

- Pelvic floor exercises