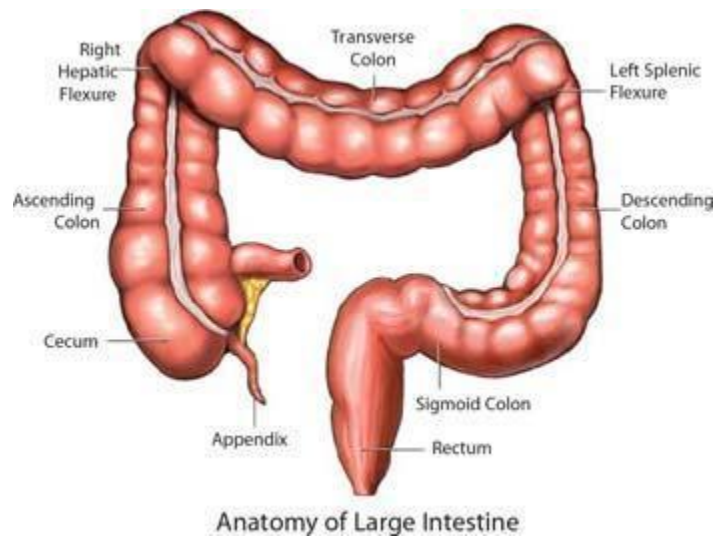


CONSTIPATION pg. 941

Is the slow, difficult or infrequent movement of feces through the bowel

- Constipation is considered a symptom rather than an actual condition
- The large intestine is comprised of ...
 - The cecum – to which the appendix attached
 - The colon – which is divided into the ascending, transverse, descending and sigmoid section
 - The rectum - which lies just anterior to the sacrum and coccyx



TYPES

- **Spastic:** Hypertonicity in the colon – Feces loose and stringy – Sympathetic stress response decreases the blood flow to the intestine, and increases the amount of toxins in the large intestine causing irritation.
- **Atonic:** Lack of tone to the colon – Feces is hard and lumpy – reliance on laxatives and decrease in dietary fiber irritates this “lazy bowel” syndrome
- **Obstructive:** Blockage of the colon – Medical emergency – Refer to a M.D

CAUSES

- Poor diet – low fibre and low water intake
- Sedentary lifestyle – by choice or due to illness
- Resisting the urge
- Stress
- Postural imbalances
- Poor muscle control – abdominal, diaphragm, muscles of pelvic floor, glutes
- Psychological factors – depression, eating disorder
- Medication side effects

- Post surgery effects
- Gastrointestinal conditions
- Physiological disorders – prolapsed colon
- Pregnancy, early post partum

SYMPTOMS

- Straining, pain or discomfort may be experienced when defecating
- Hard stools are passed, usually small in size
- Abdominal pain, cramps, discomfort may occur intermittently
- Low back pain, discomfort can result
- Bloating, flatulence
- Hemorrhoids can result
- Bad taste in mouth, bad breath, nausea and lack of appetite can result
- Headaches, irritability and general ill feeling may result

ASSESSMENT

Questions

- General state of health?
- Any stress?
- Abdominal discomfort?
- Medications?
- Client having regular bowel movement?
- Nature of the feces (Loose/stringy = Spastic, Hard/lumpy = Atonic, Black/bloody = See MD)

Observation

- Bloating in the abdomen
- Postural assessment – look for imbalances

Palpation

- Distended abdomen may feel firm, often in the distal colon
- Tenderness is felt along colon
- Hypertonicity in the abdomen region may be present
- May feel fecal obstruction through the abdomen wall

Testing

- AF ROM and PR ROM is done on muscles that the postural assessment revealed as shortened
- AR ROM is done on muscles that the postural assessment revealed as affected
- Special Tests – Rebound test (will be negative for general constipation)

OTHER CONDITIONS

Inflammatory Bowel Disease (IBD)

- Several different conditions fall under the term IBS
 - Ulcerative Colitis – results in frequent bloody and loose stools
 - Crohn’s Disease – results in periods of abdominal, low back and hip pain which often is relieved after defecation
- Client should be referred to a doctor if IBS is suspected

Irritable Bowel Syndrome (IBS)

- Also known as spastic colon
- Is a motility disorder which is strongly associated with stress, anxiety and depression
- Client presents with constipation or diarrhea

SIGNS AND SYMPTOMS

- Infrequent or difficult bowel movement
- Back or abdominal pain
- Flatulence
- Hemorrhoids
- Insomnia
- Malaise
- Leg cramps
- Headache
- Poor posture
- Halitosis from buildup of systemic toxins

CONTRAINDICATIONS

- No heat to the abdomen
- If diarrhea is present abdominal massage is CI’d
- Massage is CI’d if the Rebound test was positive. SEND TO MD

TREATMENT

- Full body relaxational massage is indicated
- Position includes prone and supine
- Spastic constipation: focus is on lower back and sacrum to increase PSF
- Atonic constipation: focus is on mechanically stimulating the colon to increase tone of the lazy bowel
- Hydrotherapy is cool to the abdomen to stimulate the colon, heat to other areas to increase relaxation

Specific Treatment

- Treat postural imbalances
- Decrease hypertonicity and TP’s in lumbar spine and gluteals

- Decrease SNS – diaphragmatic breathing
- Decrease congestion in the abdomen – effleurage and petrissage to abdomen
- Increase circulation in the abdomen
- Move fecal matter – finger tip kneading at distal colon and moving to proximal
- Maintain ROM – gentle rocking and shaking of the torso, passive circumduction of hip

SELF CARE

- Educate client – hydrotherapy
- Promote exercise regime
- Refer to doctor is necessary or naturopath
- Stretch and strengthen affected muscles
- Encourage relaxation
- Encourage a healthy diet (fibre and water)
- To help regulate the bowel, eat a piece of fruit and drink a warm glass of water and sit on the toilet for 10 minutes