

Constipation Conversation Guide for HCPs and Patients

Help patients understand constipation and how to best find relief

Introduction

As an HCP, your expertise can help provide patients with, not just the most personalized guidance, but, importantly, the most accurate and realistic set of expectations and goals to create successful treatment of their constipation. This tool is designed to help you frame that collaborative dialogue with your patients as clearly as possible.



Inside: divided between ASSESSMENT and ADVICE, you'll find ...

- A patient symptoms and behavior assessment for you or your patient to complete
- Tips on how to advise and counsel your patient based on their answers
 - This includes normalizing constipation and setting realistic goals and expectations
- A space for you to create an action plan for treating their symptoms



You can fill out these forms in conversation with your patient based on their answers to the questions included (or, if your patient prefers, they can fill these out themselves). With this information, you can better assess your patient's symptoms and determine the best solution.

How do you know if you have constipation?

Occasional constipation, or irregularity, occurs when your bowel movements become difficult or happen less frequently than is normal for you.¹ Only you can determine what is "normal" for you, but if you find your routine being thrown off by changes in your bowel movements, it can help to take a closer look.

How frequent are your bowel movements?

- Fewer than 3 times per week In between 3 times per week and 3 times per day More than 3 times per day

Do you have any of the following?

- Gas or bloating Irregular bowel movements Irritability
 Abdominal discomfort Straining Lack of energy

How long have you been experiencing any of these symptoms?*

- Less than 3 months Longer than 3 months

What is your stool type?²



Separate, hard lumps, like nuts (hard to pass)



Sausage-shaped but lumpy



Like a sausage but with cracks on its surface



Like a sausage or snake, smooth and soft



Soft blobs with clear-cut edges (passes easily)



Fluffy pieces with ragged edges, a mushy stool

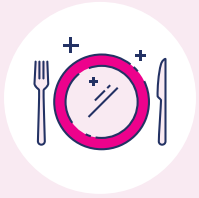


Watery, no solid pieces; entirely liquid

Types 1-2 indicate constipation, Types 3-4 are ideal, Types 5-7 indicate diarrhea

*If your symptoms last for more than 3 months, your constipation is considered chronic and may be associated with other health conditions. Experiencing the same symptoms for less than 3 months is typically considered occasional constipation, though there is no formal definition.^{1,3}

What could be causing your constipation?



The causes of constipation vary, but it can be rooted in what you put in your body, from medications to food and drink.⁴⁻⁶

Are you taking any of the following?

- | | | |
|--|---|---|
| <input type="checkbox"/> Antidepressants | <input type="checkbox"/> Opioids | <input type="checkbox"/> Antacids |
| <input type="checkbox"/> Anticonvulsants | <input type="checkbox"/> Antihypertensive drugs | <input type="checkbox"/> Iron supplements |

Are you eating or drinking the following on a daily basis?

Fruits and vegetables

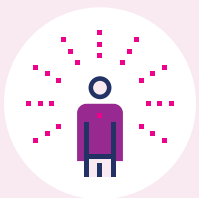
- Yes No I don't know

Water

- Yes No I don't know

Fiber-rich plant foods (broccoli, beans, whole grains, oatmeal, avocados, etc.)

- Yes No I don't know



Beyond diet and medications, some behavioral habits and routines can cause constipation.^{7,8}

Do you experience any of the following?

- | | |
|--|---|
| <input type="checkbox"/> Stress | <input type="checkbox"/> Lack of daily exercise routine |
| <input type="checkbox"/> Inconsistent sleep schedule | <input type="checkbox"/> Inconsistent bathroom visits (different times every day) |

How is constipation affecting your daily life?

Which of the following areas does your constipation affect?

- Work
- School
- Social gatherings



Now that information has been provided, a healthcare provider-directed action plan for treating constipation can be created.

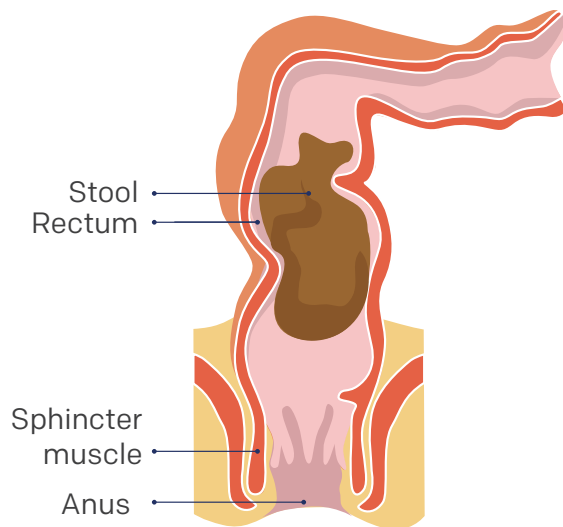
What does constipation look like?^{1,3}

To help educate your patient on the distinctions between constipation and normal bowel movements, use the anatomical diagrams below.

What is normal?

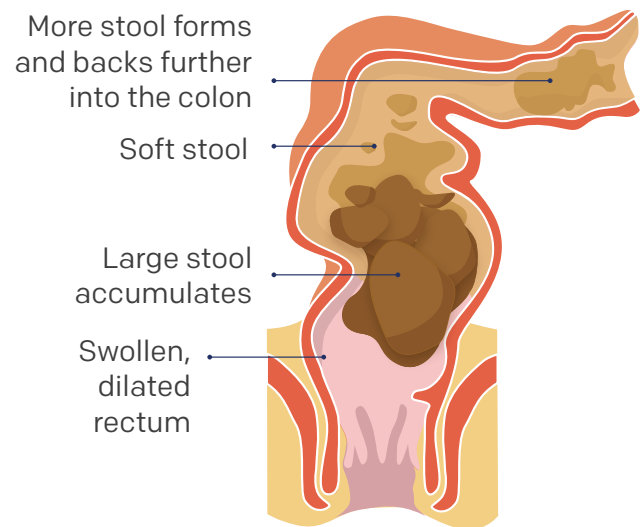
It depends on the individual.

- 3 bowel movements per week to 3 bowel movements per day
- Soft, well-formed stools passed without straining



What is constipation?

- Fewer-than-normal bowel movements, usually fewer than 3 bowel movements per week
- Bowel movements become difficult to pass





How common is constipation?

Normalize the experience of constipation by reminding your patients ...

They're not alone. Constipation is a common condition that can negatively affect daily life.⁹

In a survey of 557 patients* who reported chronic constipation

~70%

of people had difficulty working, and at least 1 in 10 missed work or school completely due to constipation⁹

33 million people suffer from the discomfort of constipation each year.¹⁰

What are the consequences of unresolved constipation?

Unresolved constipation can lead to long-term consequences, such as hemorrhoids, anal fissures, rectal prolapse, or fecal impaction.¹¹

*In the Knowledge Networks Panel.

What natural ways can they treat their constipation?



If your patient isn't eating enough high-fiber foods or hasn't established a consistent exercise and sleep routine ...

A combination of lifestyle changes and treatment options may help them achieve constipation relief.¹²

Encourage them to ...

Establish a routine

- Set aside time to exercise daily
 - Try to stay active each day with a daily walk or simply taking the stairs
- Go to the bathroom at the same time every day

Maintain a well-balanced diet

- Stay hydrated
 - Drink water throughout the day
 - Watch out for signs of thirst—this means they may already be experiencing early signs of dehydration
- Increase their daily fiber intake through fiber-rich foods and fiber supplements (whole wheat and grains, dried fruits, etc.)

Manage stress

- Take time for themselves while at home or work
- Consider yoga or meditation as a stress reliever

What if lifestyle and diet changes don't work?

Tell your patients ...








The most accessible options are over-the-counter laxatives, which work in different ways.

TYPE	HOW THEY WORK	CONSIDERATIONS
Osmotics such as MiraLAX^{®13-16}	Work naturally by attracting water in the colon to hydrate and soften stool and encourage gentle peristalsis	Not metabolized by gut bacteria Work without causing nerve stimulation, nor bloating, cramping, discomfort, or sudden urgency
Psyllium fibers such as Metamucil^{®17}	Use water to add bulk, enlarging stool to push through the colon	Metabolized by gut bacteria, which may cause bloating and gas
Stool softeners such as Colace^{®17}	Reduce surface tension in stool, allowing more water and fat in	Soften but do not promote peristalsis, so may not provide the desired relief
Stimulants such as Dulcolax[®] and Senakot^{®17}	Work by forcefully stimulating the nerves in the colon	May cause stomach discomfort, cramps, and urgency

Walk patients through this chart to help explain the risks and benefits of each option.

What if over-the-counter treatments don't work for them?

Depending on symptom severity, or if over-the-counter treatments don't suffice, remind them that prescription options are available

Rx Treatment	Generic	Indication	How does it work?
 <p>Linzess (linaclotide) capsules <small>72 mcg • 145 mcg • 290 mcg</small></p>	Linaclotide ¹⁸	<ul style="list-style-type: none"> Irritable bowel syndrome with constipation Chronic idiopathic constipation 	<ul style="list-style-type: none"> Increases the production of a chemical called cyclic guanosine monophosphate, which increases fluid secretion in the intestine
 <p>Trulance (plecanatide)</p>	Plecanatide ¹⁹	<ul style="list-style-type: none"> Chronic idiopathic constipation Irritable bowel syndrome with constipation 	<ul style="list-style-type: none"> Stimulates a peptide called uroguanylin, which increases fluid secretion in the intestine
 <p>amitiza lubiprostone</p>	Lubiprostone ²⁰	<ul style="list-style-type: none"> Opioid-induced constipation Irritable bowel syndrome with constipation 	<ul style="list-style-type: none"> Increases the activity of chloride channels, which helps to increase fluid in the intestine to soften stool
 <p>movantik (naloxegol) <small>25 mg, 12.5 mg tablets</small></p>	Naloxegol ²¹	<ul style="list-style-type: none"> Opioid-induced constipation 	<ul style="list-style-type: none"> Blocks opioid painkillers from binding to receptors in your bowel that cause constipation
 <p>RELISTOR methylnaltrexone bromide Tablets & Subcutaneous Injection</p>	Methylnaltrexone bromide ²²	<ul style="list-style-type: none"> Opioid-induced constipation 	<ul style="list-style-type: none"> Blocks opioid painkillers from binding to receptors in your bowel, helping reduce constipation
 <p>KRISTALOSE (lactulose) For Oral Solution</p>	Lactulose ²³	<ul style="list-style-type: none"> Constipation 	<ul style="list-style-type: none"> Lactulose is broken down by bacteria in the colon into types of acids that help draw water into the colon to soften stool
 <p>motegrity (prucalopride) tablets 1mg, 2mg</p>	Prucalopride ²⁴	<ul style="list-style-type: none"> Chronic idiopathic constipation 	<ul style="list-style-type: none"> Increases rhythmic movements of the colon muscle

Points to pass on—goals versus expectations

As you know, some of the biggest roadblocks to successful treatment are misaligned or misinformed expectations. Below you'll find guidance on how to establish a shared vision of success with your patient, adapted from the American Pharmacists Association as well as other expert sources.

Goals²⁵

In treating constipation, the primary goals are to:

- Relieve symptoms
- Reestablish normal bowel function
- Establish dietary and exercise habits to help prevent recurrence
- Promote safe and effective use of laxative products
- Stool consistency—a formed, soft stool¹²

These may sound like imprecise targets for patients to aim for, but the specific results in terms of time before bowel movements and frequency of movements will depend on which treatment course they end up taking (for example, Academy of Nutrition and Dietetics recommends an adult daily dietary fiber intake of 25 g for adult women and 38 g for adult men).²⁶

Expectations²⁷

Reassure patients that:

- There is a wide range of what is considered to be normal bowel function
- Normal bowel movements can be anywhere from 3 times per day to once every 2 to 3 days
- The usual time to onset of action for bulk-forming laxatives is 12 to 24 hours, but onset of effect may be delayed up to 72 hours²⁵
- They should incorporate time for a bowel routine. Ignoring the urge for a bowel movement can cause the stool to become hard and dry, making it difficult to pass

Patient adherence to principles of constipation treatment tends to be low, so they often need frequent monitoring, reinforcement, and encouragement.²⁷

Create an action plan to treat constipation

Use the sections below to make your recommendations to your patient by checking which boxes you feel apply and filling in details of any treatment-specific guidance.



Establish a routine

Schedule daily exercise

Go to the bathroom at the same time every day



Maintain a well-balanced diet

Increase daily fluid intake

Eat high-fiber foods



Manage stress

Take time for yourself while at home or work

Consider yoga or meditation

AND/OR

Take ____ dose(s) of _____, ____ times per day for ____ days

Other recommendations/instructions:

Share this action plan with your patient by printing this page.

MiraLAX[®] may be right for your patients

If a patient is looking for a gentle laxative that works in tandem with their body ...

MiraLAX[®] gently relieves constipation without harsh side effects like gas, bloating, and urgency.^{15,16,28}

Show them how it works:

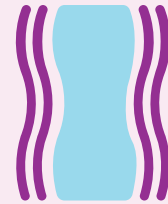
The “triple action” of MiraLAX[®] works *with* the water in their body against constipation^{13,14,29}



Hydrates the colon



Softens stool



Causes **gentle movement** of intestinal walls, promoting bowel movement

Each dose of MiraLAX[®] dissolves easily into 4 to 8 ounces of your favorite hot or cold beverage.



Remind them:

- Taking MiraLAX[®] is easy, but predictable relief requires compliance by following the instructions on the label (dissolving 1 dose [17 g] in 4 to 8 oz of liquid once per day, for no longer than 7 days)³⁰
- Their first post-MiraLAX[®] bowel movement can take 24 to 72 hours (therefore, they should not expect results any faster)³⁰

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