Constipation in Parkinson’s Disease

Many people with PD have constipation. Usually it can be corrected with time, patience and dietary changes. Constipation is not failure to have a daily bowel movement. It is normal for some people to have a bowel movement every 3-4 days. The key is to know what is normal for you. Constipation is bowel movements that become more infrequent and are dry and difficult to pass.

The key to relief is patience and consistency. Constipation takes time to develop as it takes time to restore normal bowel function. Bowel training usually takes 2 to 3 months. Often you will see no change for the first week or two. Do not be discouraged; this is normal.

It is tempting to try to control bowel function with enemas or laxatives. However, these can damage the lining and function of the bowel. You should avoid them if at all possible. Some medicines, both prescription and non-prescription, cause constipation as a side effect. Have your health care provider evaluate all of your drugs.

Following is a series of steps to restore normal bowel function. Begin with STEP 1 for two weeks. If there is no significant improvement after two weeks, add to your STEP 1 routine, the items in STEP 2 and if needed, STEP 3. STEPS 4 and 5 are to be used as a temporary last resort.

Step 1 – Diet and Fluid Intake

- Eat meals at the same times each day.
- Include fruits, vegetables, whole grain breads and cereals in daily meals.
- Drink 6 to 8 glasses (8oz each) of fluid daily. (This does not include caffeine or alcohol, which act as diuretics and can aggravate constipation.)
- Drink warm liquids on rising and with breakfast. (Warm liquid and food starts bowel activity.)
- Establish a relaxed, regular time of the day for bowel movements. (About 1/2 hour after a meal is best as there is normally greater bowel activity at this time.)
Step 2 – Bulk Formers

- Bulk formers can be purchased without a prescription. Examples are bran, metamucil and fibercon. They are not habit-forming.
- Use bulk formers daily.
- Add 1 to 2 teaspoons to bran or metamucil to your morning or evening meal each day. For fibercon, use 2 tablets per day as a starting dose.
- Drink 6-8 cups of liquid daily with bulk formers. If you do not, your constipation may actually worsen.
- DO NOT increase the amount of bulk former too quickly. Gas formation or stomach fullness may result.
- BE PATIENT. Bulk formers may take 2 to 3 months to correct constipation.

Step 3 – Stool Softeners

- While working on a bowel routine, you may need to use a softener if your stools are very hard. Stool softeners, like bulk formers, are not habit-forming and may be purchased without a prescription. Examples are Colace and Surfax.
- Use stool softener daily.
- Begin with one a day. Increase to one each morning and evening if needed.
Step 4 – Laxatives and Suppositories

☐ Laxatives should be used with caution. They activate the bowel by chemical irritation. Long-term use may actually harm the bowel. Some laxatives are especially harsh, including Ex-lax, Ducolax, Feenamint, Correctal and Castor Oil. DO NOT use these while trying to establish a bowel program.

☐ Relatively mild laxatives may be used while establishing a bowel program, but they are NOT a replacement for diet and bulk formers. Use them sparingly while you continue with your program. Mild laxatives that may be used are: Milk of Magnesia (2 tablespoons at night), Doxidan (1 tablet at night), Pericolace (1 tablet at night) or Senokot-S (2 tablets at night).

☐ Suppositories provide rectal stimulation to empty the bowel. Stool must be present in the rectum for suppositories to be effective. Suppositories must make contact with the inside wall of the rectum to work. You may need to use suppositories while establishing a bowel program. If needed, use Glycerin daily or every other day. DO NOT use Ducolax, as it is habit-forming and irritates the bowel.

Step 5 - Enemas

☐ The bowel can easily become dependent on enemas. We recommend that you use enemas only when nothing else works.

REMEMBER: CONSISTENCY AND PATIENCE ARE THE KEYS TO MANAGEMENT OF CONSTIPATION.