

How to Manage Post-operative Constipation

Even if you have regular bowel movements prior to having surgery, you are likely to experience post-operative constipation. Exposure to anesthetics and narcotics, alterations in your diet and fluid intake and reduced physical activity contribute to this constipation.

We typically include in your discharge papers, a prescription for Colace and Enulose.

- ***Colace*** is a stool-softener that makes stool easy to pass. You can start taking 100mg twice daily and may increase to a ***maximum of 200mg*** twice daily ***as needed***. This agent is not habit-forming.
- ***Enulose*** is a laxative that works by pulling water into your intestines hence helping your stool move along the intestinal tract. You should try one table spoon accompanied by two full glasses of water up to three times daily as needed.
 - o You will have to determine for yourself the amount of water needed for you to have a bowel movement as everyone is different. Start with two glasses: if your stools are very “watery”, then drink only one glass of water with one tablespoon of Enulose at your next dose.
 - o If you do not get satisfactory results, you may double or triple the dose of Enulose until you move your bowels.
- When it comes to laxatives some are harsher on your intestines than others. In our experience: Enulose is gentler than ***Miralax***, and ***Milk of Magnesia*** tends to be the harshest. You can take any of the three but ***REMEMBER TO DRINK WATER RIGHT AFTER TAKING THE DOSE!!***
- Laxatives can be habit-forming, but only when used on a long term basis

When the combination (stool softener + laxative) does not alleviate your symptoms, you may have to take a different approach. Sometimes, the problem is not the consistency of your stools as they are moving along the intestines but the presence of hard stools in your rectum acting as a plug. GENTLY place a rectal suppository such as DULCOLAX, to help remove that plug. If you try this twice without any results, then call our office at 954-659-5559.

This information is for educational purposes only and should not be relied upon as medical advice. It has not been designed to replace a physician's independent judgment about the appropriateness or risks of a procedure for a given patient.

How to Manage Post-operative Constipation

On a long term basis, regular bowel movements are based on a combination of:

- 1) well-balanced diet: plenty of fluids, fiber-rich food, regular physical activity
- 2) additional fiber: if stools are not well formed (Metamucil, Fibercon, etc...)
- 3) stool softeners- they prevent stools from being too hard (Colace)
- 4) Laxatives- to move stools along if the above don't work well.

This information is for educational purposes only and should not be relied upon as medical advice. It has not been designed to replace a physician's independent judgment about the appropriateness or risks of a procedure for a given patient.

Department of Gynecology
2950 Cleveland Clinic Blvd.
Weston, FL 33331
954.659.5124
clevelandclinicflorida.org