

Constipation is a very common problem amongst people with chronic back conditions.

This can be for a variety of reasons, as mentioned above: loss of mobility, use of analgesic medication being the obvious ones, but also we must bear in mind that there may be loss of sensation around the rectum as a part of a chronic Cauda Equina type syndrome, and possibly dysfunction of the sphincters.

The loss of sensation prevents the patients being aware of the need to void the rectum and sphincter dysfunction may lead to faecal incontinence (see below).

In addition, often people with chronic low back pain have reduced abdominal muscle tone, which affects the ability to propel the stool out of the rectum. We can see therefore how constipation can become a problem.

We must also bear in mind that unrelieved constipation itself can exacerbate back pain, and may contribute to the overall debility experienced by the patient.

Another factor which may be contributory to problems is loss of privacy, brought about by the necessity for assistance with toileting needs. It is vital to attempt to remain as mobile as possible.

If a laxative is being used, and a regular bowel habit being adopted as far as possible, it helps to incorporate ambulation (walking) or standing in order to facilitate bowel movement.

Patients with spinal cord injuries (SCI) are trained in methods of abdominal massage (effleurage) and sometimes techniques of manual evacuation should that become necessary.

