

Article 194

## **Overview**

Bowel retraining is a method in which a person relearns to have regular bowel movements.

### **Who is a candidate for the procedure?**

Bowel retraining may help people who have constipation or bowel incontinence. When a person is constipated, he or she has a hard time moving his or her bowels. Bowel incontinence is just the opposite. With this condition, a person has little or no control over the release of bowel movements. People who have had an illness or injury may have changes in their ability to control their bowels. Some medications, including many pain medications, can cause constipation. Women who have had childbirth can develop pelvic structure problems that can make passing stool difficult. Damage to certain nerves can cause loss of control. Some people may lose awareness of the need to go to the toilet.

### **How is the procedure performed?**

There are several different methods for bowel retraining. These methods can often help people with a variety of conditions that lead to the problem. It is not a substitute for other forms of treatment because it does not cure the reason the problem occurred. Bowel retraining may improve the effectiveness of other treatments or may be the only care that is needed. The main goal of bowel retraining is to produce regular bowel movements and reduce the need for medication and surgery. The diet should have enough fiber and fluids to promote soft, bulky stools. Grains and vegetables are good sources of fiber. At least two quarts of fluid a day are advised. Diet supplements containing psyllium may add bulk to the stool and further promote well formed stools. A person should set aside time for daily bowel movements. The best time is 5 to 45 minutes after a meal, since eating stimulates the bowels. This routine often encourages the person to pay attention to the body's signals. Trying to have a bowel movement about the same time each day helps train the bowel to empty regularly. For people with nerve damage or certain other conditions, bowel movements can also be brought on by stimulating the rectum with the finger. The tip of a gloved finger that has been coated with lubricant can be inserted into the anus and moved in a circular motion. Sometimes a glycerin suppository or small enema may also help to get the bowels moving. This technique should only be used on the advice of a health care professional. Care must be taken to prevent tearing the fragile tissue inside the rectum. The preferable position for a bowel movement is sitting down with a normal posture if possible. Reading may help a person relax, which can aid a bowel movement. While the stool is being expelled, a person should try to relax the anal opening, and gently squeeze the stomach muscles. This increases the pressure in the abdomen, helping to empty the bowel. A consistent pattern is the key to success of a bowel retraining program. Within a few weeks, many persons are able to establish regular bowel movements. More advanced techniques include exercises to strengthen the pelvic and rectal muscles and biofeedback. Biofeedback is a way of providing feedback, often by sight or sound, about a bodily function. For instance, a buzzer may go off every time the anus muscle contracts. A person can often learn to keep the buzzer from going off by relaxing the muscles of the anus.

### **What happens right after the procedure?**

The person can gently clean the anal area, get dressed, and use good hand-washing technique.

### **What happens later at home?**

Bowel retraining is generally performed until symptoms improve. It helps to establish a lifelong pattern of bowel regulation and care. The person is free to go back to their normal routine, setting aside time for daily bowel care.

### **What are the potential complications after the procedure?**

A person must speak with his or her healthcare professional before following these guidelines. Some people may need to omit certain portions of these guidelines. For instance, a person with congestive heart failure or chronic renal failure may not be able to drink 2 quarts of fluid a day because they can get overloaded. Medications used to move the bowels, such as suppositories, may cause diarrhea and salt imbalances in the body.

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