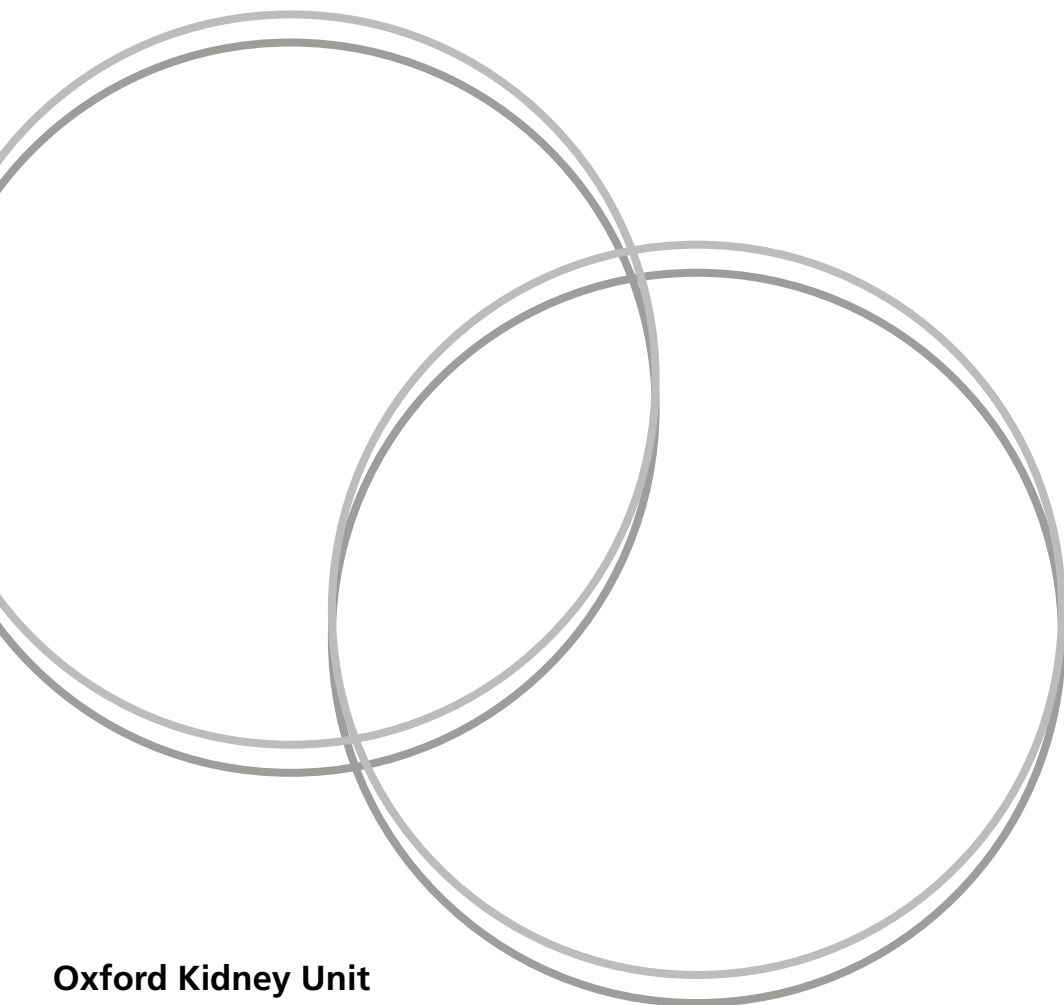


Maintaining a healthy bowel when on Peritoneal Dialysis (PD)

Information for patients



This leaflet has been written for people on peritoneal dialysis (PD). It will give you information on maintaining a healthy bowel habit. This is important to help prevent complications.

Constipation is a common condition that affects people of all ages; it is especially common in people on PD. It is really important that you have a bowel motion at least twice a day.

What will my PD nurse do?

A PD nurse will ask you lots of questions about your bowel habit. Do not feel embarrassed about discussing this with them, as it is important you get the right advice. They will use the Bristol stool chart (see next page) to discuss the type of stool you are passing. Your stools should be smooth and soft, like a sausage.








What are the symptoms of constipation?

You may experience:

- having difficulty or in pain when passing stools
- a feeling that you have not completely emptied your bowel
- excess wind, bloating or abdominal cramps
- opening your bowels less than 3 times a week
- feeling sick or vomiting and a loss of appetite
- a horrible taste in your mouth
- watery diarrhoea (in severe constipation).

Although you may open your bowels daily, you might only be emptying the lower half of your bowel. The upper part of your bowel might still be full.

Bristol stool chart

TYPE 1		Separate hard lumps, like nuts (hard to pass)	Type 1 and 2 are constipated stools
TYPE 2		Sausage-shaped but lumpy	
TYPE 3		Like a sausage but with cracks on its surface	Type 4 is a normal stool
TYPE 4		Like a sausage or snake, smooth and soft	
TYPE 5		Soft blobs with clear cut edges (passed easily)	
TYPE 6		Fluffy pieces with ragged edges, a mushy stool	Type 7 may be overflow stool or a side effect of too many laxatives or certain medicines
TYPE 7		Watery, no solid pieces Entirely Liquid	

How does constipation affect my peritoneal dialysis?

When your bowel becomes full, it can squash your PD catheter, making it difficult to drain the PD fluid out of your abdomen.

If you don't drain out all of the PD fluid it increases the amount of pressure inside your abdomen. This may give you abdominal pain and in severe cases may be dangerous.

- If you are on the Baxter APD machine it will alarm "**low drain volume**" and at the end of your treatment you will have a **lost dwell** (this is because it has taken longer to drain the fluid from your abdomen).
- If you are on the Fresenius APD machine you may experience an **A08 alarm** and your % will be in the **70s or 80s** rather than the 90s.
- If you are on CAPD, you may find that you are taking a lot longer to drain the fluid out of your abdomen and you need to stand and wriggle about. Your PD bags may not be as full as they usually are.

Always tell your PD nurse that you are having difficulty draining the PD fluid. Never ignore it.

Why is constipation a problem?

Severe constipation can cause your PD catheter to move out of your pelvis (the area between your abdomen and thighs), to the upper part of the left or right side of your abdomen. This is known as migration or malpositioning of the PD catheter. In severe cases constipation may also cause PD peritonitis (an infection of your abdomen) that needs treating with antibiotics.

What causes constipation?

Constipation can be caused by:

- a restricted, low fibre diet or a very small diet (not eating enough)
- a lack of exercise
- the side effects of some medications (such as phosphate binders, strong painkillers that contain opioids and iron supplements).
If this is happening please talk to a PD nurse/renal dietitian/renal pharmacist, they should be able to offer an alternative medication. Do not stop your medication without seeking advice.
- medical problems, such as high calcium levels, diabetes mellitus, depression or anxiety
- a restriction on how much fluid you can drink.

PD may also lead to constipation by drying out your stool.

How do I maintain a healthy bowel habit?

- Eat a high fibre diet. High fibre foods include wholegrain foods, such as wholemeal rice or pasta and cereals such as bran flakes, shredded wheat and porridge oats. If you are increasing your fibre intake, it is important to increase it gradually, as a sudden increase may make you feel bloated, windy and give you abdominal cramps.
- Eat plenty of fruit and vegetables. Most people on peritoneal dialysis do not need to follow a low potassium diet. If a dietitian has advised you otherwise, choose low potassium fruit and vegetables. If you would like to speak to a dietitian please call them on Tel: 01865 225 061.
- Exercise (within your physical limits) can also improve bowel regularity. Something like a daily walk or yoga can help.
- Don't ignore the urge to open your bowels.
- Keep to a regular time and place and give yourself plenty of time to use the toilet.
- When you use the toilet try sitting in a squatting position and leaning forward, so that you are relaxed.
- Take your laxatives as prescribed. They work best if taken regularly. You may need a combination of two or three laxatives for them to be effective.
- Don't restrict your fluid intake below your fluid allowance.

Laxatives prescribed for people on peritoneal dialysis

Docusate sodium

Brand names: Dulcoease or Dioctyl

Docusate sodium is a stool softener. It works by increasing the penetration of water and fats into dry and hard stools. It also helps to make the bowel muscles contract more often and with more force. This allows the stools easier to pass.

Docusate sodium takes one or two days to work.

How do I take docusate sodium?

Take 200mg in the morning, 100mg at lunchtime and 200mg in the evening or bedtime. You should take it regularly as prescribed.

Will I experience any side effects?

You may experience some abdominal cramps, feel sick, and have diarrhoea. Skin rashes and allergic reactions are rare.

Macrogol

Brand name: Movicol, Laxido, CosmoCol, Molaxole or Molative

Macrogol helps to soften stools by absorbing water. This makes passing the stool easier and more comfortable. If you are on a fluid restriction you may find this treatment more difficult. Please talk to a PD nurse/dietitian/pharmacist if this is a problem.

Macrogol can take one to two days to work.

How do I take macrogol?

You need to take one sachet, one to three times every day. Mix the sachet with 125ml of water or squash.

Will I experience any side effects?

You may get some abdominal bloating, cramps, feel sick and have wind (flatulence).

Senna

Brand name: Senokot

Senna contains sennosides, which work by making bowel muscles contract more often and with more force. This increased muscle action helps to move bowel contents to the rectum more easily.

This medicine usually takes about 8 hours to have an effect. Senna is not recommended for long-term use, as it can cause the bowel to become lazy.

How do I take senna tablets?

You will need to take 2 tablets at bed time. A PD nurse or kidney doctor may suggest 2 tablets in the morning and 2 tablets at bed time.

Will I experience any side effects?

You may notice that your stool or urine is red-brown or yellow in colour. You may experience abdominal or cramp-like pains.

What natural products can I try?

Linseed or Flaxseed (golden or brown)

This can be bought from any supermarket. Do not take linseed oil, as this doesn't work in the same way.

How do I take linseed?

Start with 1 teaspoon, twice a day, and gradually increase to 1 tablespoon twice a day (take each tablespoon with 150mls water). You can also mix it with foods, such as yogurt or porridge.

Will I experience any side effects?

Adding linseed to your diet might increase the number of bowel movements you have each day. It may also cause side effects, such as bloating, wind, abdominal pain, constipation, diarrhoea, and feeling sick.

OptiFibre®

This is a food for special medical purposes. It is a granulated powder that can be added to liquids or food and doesn't affect the flavour or texture. It contains partially hydrolysed guar gum and is suitable for people with coeliac disease or lactose intolerant.

1 scoop 5g = 4.3g soluble fibre. We will ask your GP to prescribe you a 250g tin, as this has a resealable lid.

How do I take Optifibre?

- **Day 1 to Day 3**

Add 1 scoop/sachet to tea, coffee, cold fluids or foods or add 1 scoop/sachet to 200mls fluid or 150g food.

- **Day 4 to Day 6**

Increase to 2 scoops/sachets staggered throughout the day. You may need to reduce the dose of your laxatives by half. Do not stop completely.

- **Day 7 to Day 9**

Increase to 3 scoops/sachets staggered throughout the day.

If you are taking more than 2 laxatives you may need to stop one of these.

If your PD treatment is going well and your bowel habit is at least twice a day you won't need to increase the dose of OptiFibre.

Please speak to a PD nurse before increasing the dose.

- **Day 10 to Day 12**

Increase to 4 scoops/sachets per day staggered throughout the day. Do not stop your laxatives.

- **Day 13 to Day 20**

If more fibre is required, increase the intake of OptiFibre at a dose of 1-2 scoops/sachets every 3 days without exceeding 35g fibre per day (8 scoops/sachets).

Stagger the servings throughout the day. If you are on a fluid restriction you can take 1 scoop/sachet with 100mls fluid.

Will I experience any side effects?

You may experience stomach cramping or wind.

Severe constipation treatment

Citramag and Senna

If you still remain constipated after trying the routine treatments, or you are having problems with your PD, a PD nurse will recommend a single treatment of Citramag and senna. Citramag is a very powerful bowel cleansing agent.

How do I take the senna?

A PD nurse will give you 10 senna tablets (or 75mg). You need to take these all in one go. You then need to take the Citramag 2 hours later.

How do I take Citramag?

You should not take any medications for 1 hour before and 1 hour after taking the Citramag, as this may affect the absorption of the medications.

Citramag comes as a powder and needs to be made up to a solution. Pour 200mls of hot water into a large cup or jug and slowly add the contents of the sachet, stirring until it is fully dissolved. Leave it to cool completely (about 30 minutes), then drink the solution.

You may need to take two sachets, but leave at least 6 hours between the first and second sachet. You may need to take one sachet on the first day and the second sachet the next day, if you do not have enough time in the day.

Do not take it later than 4.00pm, as you may find that you are up all night going to the toilet.

After taking the senna and Citramag:

- Stay near a toilet. You may get diarrhoea within an hour of taking the senna, although this may not happen until you have taken the sachet of Citramag (this is what should happen). The diarrhoea will last for about 4 hours.
- Stop your usual laxatives for the days you are taking the severe constipation treatment and restart them the following day.

Will I experience any side effects?

You may experience some sickness or bloating and abdominal pain (usually short lasting). Less frequent side effects include headache, dizziness and dehydration. Please contact a PD nurse if you think you may be dehydrated.

What happens after I have had the treatment?

A PD nurse will need to see you in the hospital so they can make sure your dialysis treatment is working well. If you continue to have problems with your PD, a nurse will talk to you about the next options. If your PD still isn't working well, you will need an abdominal X-ray to check the position of your PD catheter.

A PD nurse/doctor will talk with you about this.

Contacts

Oxford Peritoneal Dialysis Unit

Tel: **01865 225 792**

(8.30am to 6.00pm, Monday to Friday)
(answerphone available)

Swindon PD Unit

Tel: **01793 605 288**

(answerphone available)

Wycombe PD Unit

Tel: **01494 426 349**

(answerphone available)

Milton Keynes PD Unit

Tel: **01908 996 495**

(answerphone available)

Renal Ward (Out of hours)

Churchill Hospital

Tel: **01865 225 780**

Renal Dietitian

Tel: **01865 225 061**

(answerphone available)

Renal Pharmacists

Churchill Hospital

Tel: **01865 226 105**

Email: **orh-tr.oxfordrenalpharmacy@nhs.net**

9am to 5pm, Monday to Friday

(Please leave a message on the answerphone)

Useful websites

Oxford Kidney Unit

Lots of information about the Oxford Kidney Unit for patients and carers.

Website: www.ouh.nhs.uk/oku

Kidney Patient Guide

Information for patients with kidney failure and those who care for them.

Website: www.kidneypatientguide.org.uk

Kidney Care UK

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidneycareuk.org

Six Counties Kidney Patients Association

The SCKPA is run for patients by patients or family members.

They offer support to people suffering from kidney disease or who are on dialysis. They work closely with the Oxford Kidney Unit and have branches in Oxfordshire, Northamptonshire, Buckinghamshire, and Milton Keynes, and parts of Wiltshire, Gloucestershire and Berkshire.

Website: www.sixcountieskpa.org.uk

National Kidney Federation

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidney.org.uk

Health for Me (patient portal)

'Health for Me' enables you to access to your digital health record via the OUH Patient Portal. It is an online system that allows you to easily view parts of your digital health record safely and securely from a computer or smartphone.

Please ask a member of the renal team to sign you up to the patient portal.

If your bloods are taken through the Oxford Kidney Unit you will be able to see these results. We can give you a leaflet that explains what the blood test results mean. If you would like a copy please ask a member of the renal team.

NHS website

Website: www.nhs.uk/Conditions/Constipation

This provides a lot of useful information about constipation. Remember to seek advice from your PD nurse or kidney doctor before trying anything new.

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
www.ouh.nhs.uk/information



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