

Seek Early Medical Attention

While no direct link has been established between constipation and colon polyps or cancer, it is worth noting that most patients with constipation have an insufficient fibre intake. Studies show that inadequate fibre intake is associated with colon polyps and cancer, and the risk of colon cancer is especially higher in older people. If there is a sudden change in bowel habits, seek medical attention and check-up such as blood tests and stool examinations. Also, if constipation suddenly worsens or is accompanied by abdominal pain or other symptoms, consult your doctor promptly to investigate the underlying causes.



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Closed on Sundays and Public Holidays
Consultation by Appointment

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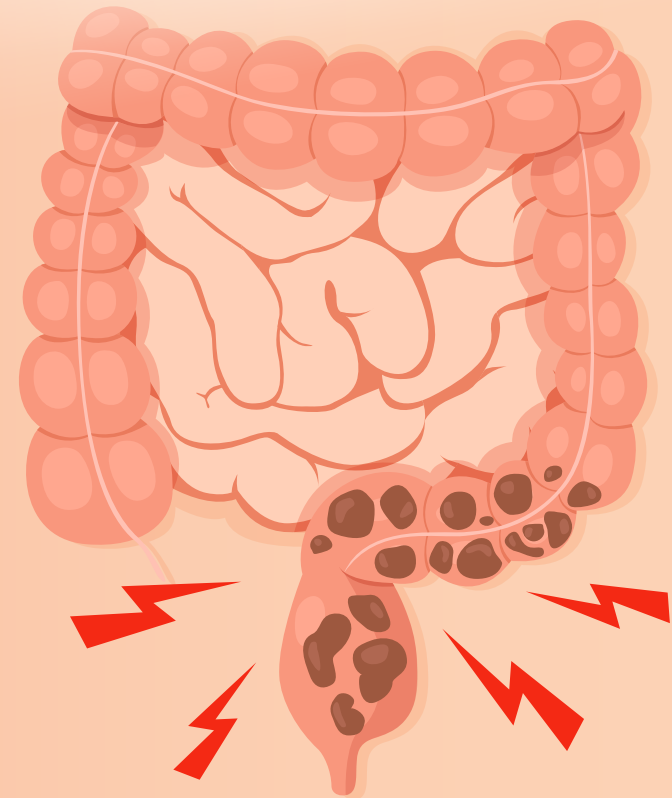
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For enquiries and appointments,
please contact us



Constipation



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Prevalent in city dwellers, constipation is primarily caused by an unhealthy lifestyle, such as insufficient fibre or fluid intake and lack of exercise. As the muscular movement through the gastrointestinal tract (or peristalsis) slows down, stools may remain in the intestine for too long and become hardened with water absorbed by the colon.

Constipation is usually defined as having fewer than two bowel movements a week or difficulty passing stools, with symptoms lasting over 4 weeks.

Causes and Risk Factors

Constipation is closely associated with diet, exercise and bowel habits. Normally the body passes stool from the previous day in the morning or after meal. However, if one holds bowel movements due to a busy work schedule or other reasons, stools may accumulate and become hardened, making it more difficult to pass.

Specifically, constipation can be categorised into functional and secondary constipation, with functional constipation being the more common cause.

Functional constipation is either idiopathic or due to colonic conditions, without any underlying medical conditions. Some types of functional constipation include irritable bowel syndrome with constipation (IBS-C), slow-transit constipation (STC) and dyssynergic defecation.

- IBS-C is a chronic condition presenting with constipation, leading to infrequent bowel movements and difficulty passing stool. The exact cause of IBS is not known, but it is related to a combination of factors, including genetics, stress and changes in gut motility.
- STC is a condition characterised by the slow movement of faeces through the digestive system, mainly caused by reduced large intestine motility. This results in increased water absorption by the intestines and the formation of hardened stools.
- Dyssynergic defecation is another potential cause of functional constipation due to pelvic floor muscles and nerve incoordination affecting a normal bowel movement. It is often associated with dysfunctional pelvic floor, potentially caused by pregnancy, childbirth, pelvic floor injury and ageing.

In addition to functional constipation, systemic factors such as underlying medical conditions or medication side effects contribute to secondary constipation. Medical conditions such as diabetes, hypothyroidism and Parkinson's disease can increase the risk of constipation. Certain medications, including NSAIDs and calcium-or aluminum-containing antacids, can lead to constipation as a side effect. Finally, lifestyle

factors such as dehydration, low-fibre intake and a lack of physical activity can also contribute to secondary constipation.

If persistent, constipation can adversely impact daily life and increase the risk of complications, including haemorrhoids, anal ulcers or fissures and intestinal diseases. Abdominal pain or diverticulitis may even occur in severe cases.

Prevention



- Maintain a balanced diet with plenty of high-fibre food, e.g. vegetables, prunes, red or brown rice
- Drink plenty of fluids every day
- Exercise regularly
- Maintain good bowel habits and do not ignore the urge to defecate
- Do not take over-the-counter laxatives. Always consult your doctor before taking any medications

To relieve constipation, doctors usually recommend patients to include high-fibre food in their diet, increase water intake and maintain regular bowel habits. Medications are considered only if the problems persist.