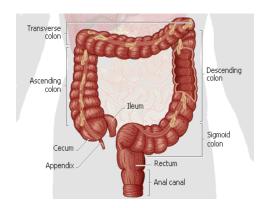
Bowel Management



Effective bowel management consists of the following:

- Regular emptying of faeces at a socially acceptable time and place
- Avoiding constipation and incontinence
- Avoiding Autonomic Dysreflexia and pain
- Minimal or no use of laxatives
- Effective manual techniques: digital stimulation and manual evacuation
- Complete evacuation of faeces
- Minimal or no abdominal discomfort, bloatedness and wind
- Minimal or no trauma to the surrounding skin or anal area

Handy Hints

- ✓ Keep bowel care to the same time of day
- Keep to the same frequency i.e. daily or alternate days
- ✓ Have a hot drink and something to eat 30 minutes before bowel care to stimulate gut activity
- ✓ Drink enough fluids
- ✓ Eat well balanced meals at regular times of day
- ✓ Bending/leaning forward and exercise helps to move faeces through your intestines and into your bowel
- ✓ Gravity helps: if you are able, sit upright over a toilet for bowel care
- ✓ Look after your skin: use a padded toilet seat or appropriate shower chair
- Abdominal massage can be useful to aid movement of faeces
- ✓ For best results place suppositories against rectal wall and not amidst faeces
- ✓ If you alter your routine you may have 'accidents'. Seek advice
- Avoid using laxatives on a regular basis attention to an appropriate diet is better
- Changes to your lifestyle (e.g. holidaying abroad), may affect your bowels. Persevere with your bowel regime to encourage it to become regular again
- ✓ Seek advice if you are experiencing episodes of faecal incontinence or constipation
- ✓ Seek advice if Autonomic Dysreflexia is regularly experienced during bowel care
- Seek advice if rectal bleeding or trauma to the rectal area occurs
- Remember what suits others may not suit you

Resources

Get advice before problems become too difficult to manage:

- Your District Nurse
- The Spinal Outpatient Nurses/Spinal Consultant 01722 429291

■ Your G.P

The Spinal Injuries Association (S.I.A.)
0800 980 0501