



CONSTIPATION

ABOUT THE DISEASE

Constipation occurs when patients have difficulty passing stools. Difficulty passing stool (hard/dry or ribbon-like). Strains without production—**not** low output (colon stores days' worth, e.g., post-op motility drop).

Differentiate from:

- Dyschezia: Defecation difficulty unrelated to hardness.
- Tenesmus: Urgent empty-bowel straining.
- Dysuria: Painful urination.
- Pollakiuria: Frequent small urinations.

Causes:

- Medication side effects
- Renal dehydration.
- Ingested foreigns (hair, plants).
- Electrolyte imbalance (seniors).
- Obstruction (mass, prostate).

OBTAINING A DIAGNOSIS

A physical exam may allow the DVM to determine the presence of hard stool in the colon, though in some cases the patient may be too painful and tense to be certain. A radiograph (x-ray) is the most definitive test to confirm constipation.

Bloodwork may be necessary to help determine underlying cause.

TREATMENT

Long-term: Prescription low-residue, high-fiber GI diet.

Acute (single): Stool softeners/laxatives ± enema.

Recurrent: Deobstipation (hospital/anesthesia for manual removal); motility meds.

Megacolon: Subtotal colectomy (neuromuscular colon reduction).

TIPS FOR SUCCESS

- Seek veterinary care if patient is straining without producing feces or urine.
- It is important to not mislabel your patient's symptoms, as it will often impact diagnostic and treatment option.
- Do not attempt to alleviate patient constipation at home with human products, especially without veterinary guidance. Some human products (laxatives, enemas, etc.) can be toxic in animal patients.