

Laxatives in palliative care

Fact sheet

What are Laxatives?

Laxatives are medicines which help to relieve constipation. There are many types available, but some are more appropriate and effective in palliative care than others.

Constipation is unfortunately very common in the palliative care setting. It can cause a lot of discomfort and distress, and many people find it embarrassing to talk about. Constipation is best prevented, but can be managed successfully in most cases.

Don't suffer in silence. Speak to your nurse or doctor to develop a management plan.

Recommended laxatives in palliative care:

Laxatives are categorised according to the way they work on the bowel. The main types used in palliative care are stimulant, stool softening and osmotic laxatives.

Stimulant laxatives: e.g. *Senna*, *Bisacodyl* (*Durolax*). Stimulant laxatives work by increasing the activity of the bowel muscles to move the bowel contents forward. They are usually used in conjunction with a **Stool Softener** e.g. *Coloxyl* (*Docusate*), which works by allowing moisture to penetrate and soften hard stools. There are some natural (propriety) medicines which also have a stimulant action. If in doubt discuss their use with your doctor or nurse.

Too much stimulant may cause colic and cramping abdominal pains. There are no known side effects of stool softeners.

Coloxyl (50mg) and *Senna* (5mg) is commonly available as a combination tablet, but generally the ratio of stimulant to softener is too high. In palliative care it is often necessary to use the individual laxatives to make up the necessary combination.

Coloxyl is available in 120 mg tablets.

Osmotic laxatives: e.g. *Movicol*, *Lactulose* (*Duphalac*, *Actilax*, *Lact-dol*). Osmotic laxatives work by using fluid from the body to soften and increase the volume of the existing stools, making them softer and easier to pass.

Osmosis is a term which means water being drawn across a membrane from a place of low concentration to a place of high concentration. In this instance it relates to water being drawn into the gut from the body's circulation through the gut wall.

Movicol comes as a powdered granule and is mixed with water. It keeps this water within the bowel, rather than it being absorbed by the gut. This increases the water content and volume of stool in the bowel, without taking any fluid from the body's circulation.

Movicol requires a reasonably normal fluid intake for it to work.

Lactulose (*Duphalac, Actilax, Lact-dol*) are concentrated complex sugar solutions which are broken down by the bacteria that live in the lower part of the gut. This leads to the contents of the gut becoming more acidic, which reduces the absorption of a chemical called ammonia. The presence of ammonia in the gut causes water to be drawn into the lower bowel. This increases the amount of water in the stools, softening them and making them easier to pass. It can take 48 hours to have an effect.

These laxatives are primarily useful for people who can drink at least two litres of liquid a day. If there is not enough fluid in a person's system the complex sugars ferment and create wind and bloating, which can cause painful colic.

Be regular to keep regular

Having to take regular medications to make what used to happen automatically might seem like a bother. However, keeping to a routine of monitoring your bowel habits, and adjusting the laxatives as needed, will keep you regular, adding to your comfort and well-being, making the effort worthwhile.

Other commonly available laxatives

Bulk forming laxatives

Bran, Normacol, Fybogel, Metamucil, Nulax, Psyllium husks

These laxatives work by swelling when they come into contact with fluid, increasing the amount of stool and encouraging the bowel to push the stools forward and out.

They can take a few days to work properly and are ideal for people who are healthy and active, and can drink large amounts of water.

They have limited use in the palliative care setting as most people are unable to drink sufficient fluid and the bulk forming laxatives can end up sticking to the inside of the bowel, causing obstruction.

Other laxatives which are commonly available but not generally recommended include

- liquid paraffin (*Agarol*);
- Magnesium salts (*Epsom salts*);
- *Parachoc*; and
- Oral *Fleet* and *colonLYTELY* (preparations used before bowel investigations or surgery).

Ford pills, *Laxettes* and other proprietary (trademark) medications are generally not effective for palliative care needs except in doses that are toxic, adding to overall discomfort.

Suppositories and Enemas

Suppositories and enemas are used when there is a hard stool which is sitting down low in the rectum. Sometimes it is necessary to move this hard plug with lubrication such as a glycerin suppository before increasing oral laxatives. *Microlax* enemas are also useful in emptying the rectum.

When to call the doctor or nurse

- If you are having difficulty maintaining a regular bowel pattern and are suffering discomfort; or
- If you have constipation with severe abdominal cramping pain and vomiting (do not take laxatives).

Related Fact Sheets

Constipation

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