

Protecting and improving the nation's health

Health Inequalities: Constipation

## Introduction

Constipation, defined by bowel symptoms of difficult or infrequent passage of stool, hardness of stool, or a feeling of incomplete evacuation<sup>1</sup>, is a condition known to be more common amongst people with learning disabilities.

## Prevalence

Estimates from a large population-based study in Scotland<sup>2</sup> reported a third (33.8%) of adults with intellectual disabilities experienced constipation. A recent international systematic review<sup>3</sup> found reported rates of constipation between 33% and 50%.

Data from 47% of GP practices in England for 2017/18<sup>4</sup> are available for constipation, reporting that 12.4% of patients with learning disabilities have had a diagnosis of chronic constipation in the last 5 years or have received 2 constipation medications in the last 12 months at least 6 months apart. This is a much lower prevalence than research studies. As constipation has also been found to be one of the most common causes of emergency admission to hospital for people with learning disabilities<sup>5</sup>, this suggests constipation is not necessarily well managed. Further, the chronic constipation commonly experienced by people with learning disabilities can be highly detrimental to quality of life and potentially life threatening<sup>6</sup>.

# Impact on people with learning disabilities

The reasons why people with learning disabilities are more at risk of constipation than the general population may include: frequent prescription of constipating medication, for example anti-psychotic drugs<sup>7</sup>, poor diet<sup>8</sup>, physical mobility limitations<sup>9</sup>, and low levels of physical activity<sup>10</sup> <sup>11</sup>.

A person with learning disabilities may be unable to communicate verbally to others that they are constipated and instead may show the effects of constipation via distress, sleep disturbance or changes in their behaviour<sup>12</sup> <sup>13</sup> <sup>14</sup>.

Two serious case reviews in Suffolk were conducted into 2 deaths of people with learning disabilities who suffered bowel impactions and died due to poorly managed constipation<sup>15</sup> <sup>16</sup> <sup>17</sup>, highlighting that poorly managed constipation is not just

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distressing but life threatening. Twelve further deaths of people with learning disabilities as a result of constipation have been reported to the English Learning Disabilities Mortality Review and identified as a priority for action 18.

# Risk factors

A systematic review<sup>3</sup> concluded that although constipation was found to impact people with learning disabilities of all ages and genders, constipation is more common amongst people with cerebral palsy and profound learning disabilities, and those less mobile. GP data<sup>4</sup> suggests that constipation is more common among older people with learning disabilities, with rates steadily increasingly along the life course from 10% in childhood to 33.5% among those over 75.

People with Down syndrome are more likely to have hypothyroidism<sup>19</sup> which is associated with constipation<sup>20</sup>.

## Healthcare and treatment

The most frequently prescribed treatment for constipation is laxatives<sup>21</sup>. The frequency of hospital admission described above indicates that constipation is often not managed appropriately in primary care.

A review of constipation management<sup>2021</sup> noted that most studies examined the role of dietary fibre and laxatives, whereas few noted the impact of staff. Staff in supported living are often in charge of menus and therefore play a large part in determining the diet that people they support follow.

There are no National Institute for Health and Care Excellence (NICE) clinical guidelines specifically relating to people with learning disabilities and constipation. Guidelines around good bowel management and a reasonable adjustment guide are available from Public Health England<sup>22 23</sup>. These guidelines suggest an individual approach and not a reliance on laxatives. It includes advice on diet, fluid, toileting posture, and red flag symptoms which indicate medical attention is sought.

## Social determinants

Poor management of constipation may be compounded by social determinants of health including poverty, poor diet, and, within community settings, lack of awareness from social care staff. The inquest into the death of Richard Handley illustrated that management of constipation within care settings can be poor because of a lack of holistic approach to diet, exercise and medication.

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# Resources

Public Health England (2018) <u>Easy read introduction to the constipation reasonable</u> <u>adjustments guide</u>

Public Health England (2018) Reasonable adjustments guidance: constipation

# References

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