

## DURING AND AFTER TREATMENT

# Constipation: Common Side Effect

Suzanne M. Mahon, DNS, RN, AOCN®, AGN-BC, FAAN, and Ellen Carr, PhD, RN, AOCN®

*For constipation, standards of care are based on established evidence-based practice.*

## Definition

- Constipation is the decreased passage of stool characterized by infrequent bowel movements, hard stool, a sensation of abdominal bloating or cramping, straining with bowel movements, and the feeling of incomplete evacuation.

## Incidence

- Constipation occurs in 43%–58% of people with a diagnosis of cancer.

## Assessment Tools and Recommended Intervals

- Assessment should review the normal pattern of elimination, including frequency, time of day, and stool characteristics (e.g., color, consistency, odor).

## Prevention

- Advise hydration with at least two liters of caffeine-free fluids daily.

## Interventions and Management

- Opioid-induced constipation treatment should include initial treatment with osmotic (e.g., polyethylene glycol, magnesium citrate) or stimulant (e.g., senna, bisacodyl) laxatives in addition to lifestyle education.
- For persistent opioid-induced constipation that has not responded to a bowel regimen, consider treatment with a peripherally acting mu-opioid receptor antagonist (PAMORA) (i.e., methylnaltrexone, naldemedine, or naloxegol) in addition to the existing bowel regimen. For those unable to take other forms of PAMORAs, subcutaneous methylnaltrexone may present an effective option.
- Non-opioid-related constipation should be treated with osmotic or stimulant laxatives in addition to education about lifestyle choices.

## Agents and Interventions to Avoid

- Avoid dehydration, inactivity, or poor fiber intake, which are risk factors for constipation.

## Evidence-Based Resources for Providers

- ONS Guidelines™ for Opioid-Induced and Non-Opioid-Related Cancer Constipation ([www.ons.org/pep/constipation](http://www.ons.org/pep/constipation))
- NCCN Clinical Practice Guidelines in Oncology: Survivorship (v.3.2021) ([www.nccn.org/professionals/physician\\_gls/pdf/survivorship.pdf](http://www.nccn.org/professionals/physician_gls/pdf/survivorship.pdf))
- Oncology Nursing Society Get Up, Get Moving campaign ([www.ons.org/make-a-difference/quality-improvement/get-up-get-moving](http://www.ons.org/make-a-difference/quality-improvement/get-up-get-moving))

## Evidence-Based Resources for Patients and Family

- Oncology Nursing Society Clinical Practice Resources: What Can I Do About Constipation? ([www.ons.org/clinical-practice-resources/what-can-i-do-about-constipation](http://www.ons.org/clinical-practice-resources/what-can-i-do-about-constipation))
- Oncology Nursing Society Get Up, Get Moving campaign ([www.ons.org/make-a-difference/quality-improvement/get-up-get-moving](http://www.ons.org/make-a-difference/quality-improvement/get-up-get-moving))

## REFERENCES

- LeFebvre, K.B., Rogers, B., & Wolles, B. (2020). Cancer constipation: Clinical summary of the ONS Guidelines™ for opioid-induced and non-opioid-related cancer constipation. *Clinical Journal of Oncology Nursing*, 24(6), 685–688. <https://doi.org/10.1188/20.CJON.685-688>
- Rogers, B., Ginex, P., Anbari, A., Hanson, B., LeFebvre, K.B., Lopez, R., . . . Morgan, R.L. (2020). ONS Guidelines™ for opioid-induced and non-opioid-related cancer constipation. *Oncology Nursing Forum*, 47(6), 671–691. <https://doi.org/10.1188/20.ONF.671-691>

**Suzanne M. Mahon, DNS, RN, AOCN®, AGN-BC, FAAN**, is a professor in the Department of Internal Medicine in the Division of Hematology/Oncology and in the Trudy Busch Valentine School of Nursing at Saint Louis University in Missouri and **Ellen Carr, PhD, RN, AOCN®**, is the editor of the *Clinical Journal of Oncology Nursing* at the Oncology Nursing Society in Pittsburgh, PA. The authors take full responsibility for this content. The article has been reviewed by independent peer reviewers to ensure that it is objective and free from bias. Mahon can be reached at [suzanne.mahon@health.slu.edu](mailto:suzanne.mahon@health.slu.edu), with copy to [CJONEditor@ons.org](mailto:CJONEditor@ons.org). (Submitted June 2021. Accepted August 26, 2021.)

## KEYWORDS

cancer; symptoms; side effects; late effects; long-term side effects; survivorship care

## DIGITAL OBJECT IDENTIFIER

10.1188/21.CJON.S2.26