

East Tennessee State University

Digital Commons @ East Tennessee State University

Appalachian Student Research Forum

2020 ASRF Presentations

Constipation in the Long-Term Care Resident

Georgiana Hogan

East Tennessee State University

Janice Lazear

East Tennessee State University

Jean Croce Hemphill

East Tennessee State University

Catherine Hebert

Charles George VA Medical Center

Emily Wood

Charles George VA Medical Center

Follow this and additional works at: <https://dc.etsu.edu/asrf>

Hogan, Georgiana; Lazear, Janice; Hemphill, Jean Croce; Hebert, Catherine; and Wood, Emily, "Constipation in the Long-Term Care Resident" (2020). *Appalachian Student Research Forum*. 4. <https://dc.etsu.edu/asrf/2020/presentations/4>

This Oral Competitive is brought to you for free and open access by the Events at Digital Commons @ East Tennessee State University. It has been accepted for inclusion in Appalachian Student Research Forum by an authorized administrator of Digital Commons @ East Tennessee State University. For more information, please contact digilib@etsu.edu.



Guideline for Constipation in the Long-Term Care Resident

Georgiana C. Hogan

Charles George VA Medical Center and East Tennessee State University



Background and Significance

Purpose: To create a clinical practice guideline for the prevention and management of constipation in the long-term care (LTC) (nursing home) resident.

- Constipation is uncomfortable, undermanaged, and isolating condition
- Prevalence is approximately 10-71% in LTC residents
- Laxative use is found in over 1/2 of all LTC residents
- Billions in health care costs
- Minor and serious complications

Three published clinical practice guidelines for constipation:
 American Gastroenterological Association (2013)
 The American Society of Colon and Rectal Surgeons' (2016)
 Joanna Briggs Institute (2008)

Do not address the Long-Term Care resident

Barriers to constipation being an unpopular and undertreated topic

- Bowel habits are private
- Constipation is rarely life-threatening
 - fecal impaction may have significant morbidity and mortality.
- Incorrectly assessed as "imagined"
- Subjective nature makes diagnosis difficult
- Fear of treatment induced diarrhea
- Not discussed until in a crisis

Long-term care residents are a vulnerable population who care about their bowel function. They will benefit from a tailored guideline.

Methods

Phase 1 – Guideline Rough Draft Creation

- Literature Review
- Delphi Committee
 - Gastroenterologist, pharmacist, and two gerontologists

Phase 2 – Assess Guideline Clinical Applicability
 LTC Interdisciplinary Team (n=30)
 Education session
 Survey

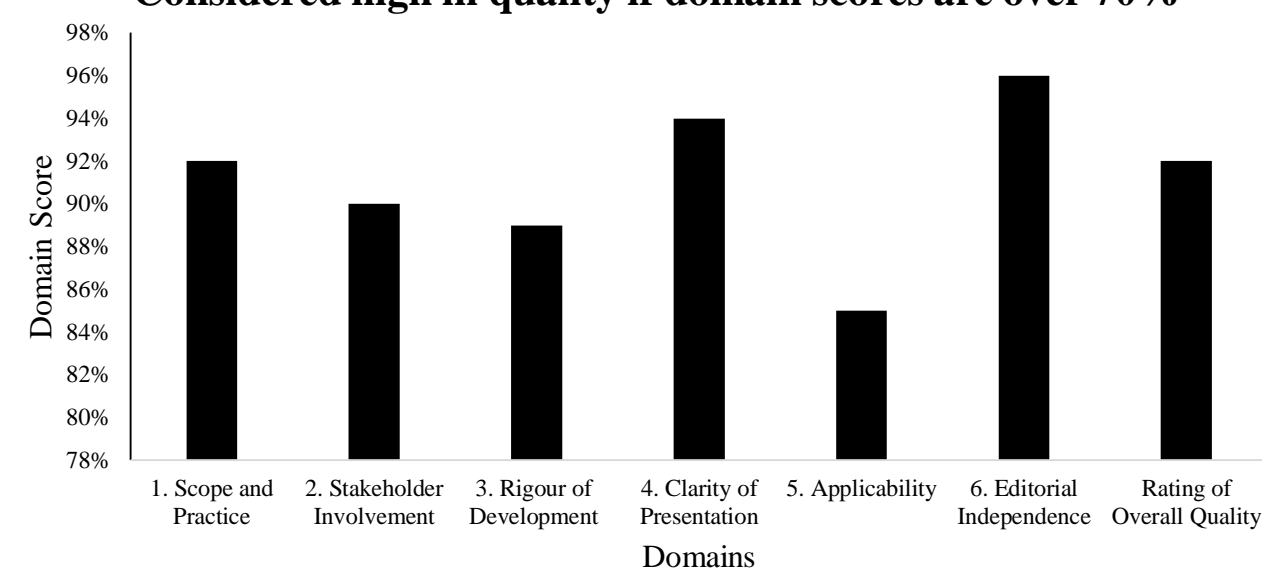
Survey Questions	Total (n=30)
Constipation is an important topic for long-term care residents	3.53
I feel that this guideline provided helpful information for the prevention and treatment of constipation	3.80
This guideline was applicable to long-term care residents I care for	3.79
The information provided in the guideline was easy to understand	3.66
I feel that constipation could be prevented or more appropriately treated because of the information presented in the guideline	3.69
I believe that the long-term care residents bowel function could be improved in the future following the recommendations in the guideline	3.55
I will share information provided in this guideline with others	3.80

Results and Discussion

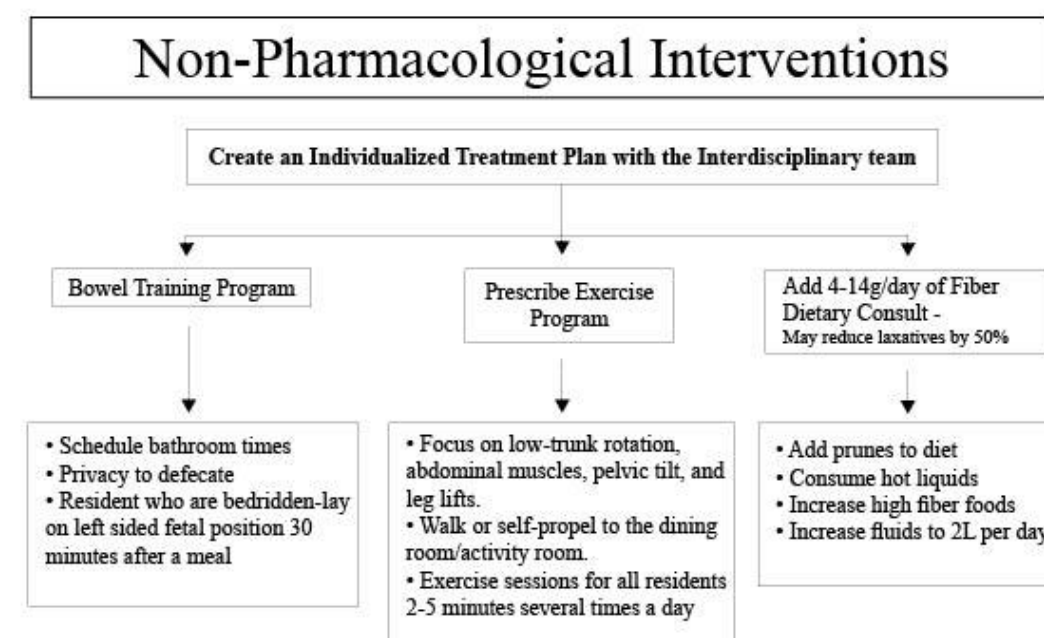
Phase 3 – Assess guideline quality

- AGREE II Instrument
- East Tennessee State University Alumni and Faculty
- Four practicing nurse practitioners

Considered high in quality if domain scores are over 70%



Nonpharmacological Interventions



Constipation is a Brain-Gut Disorder

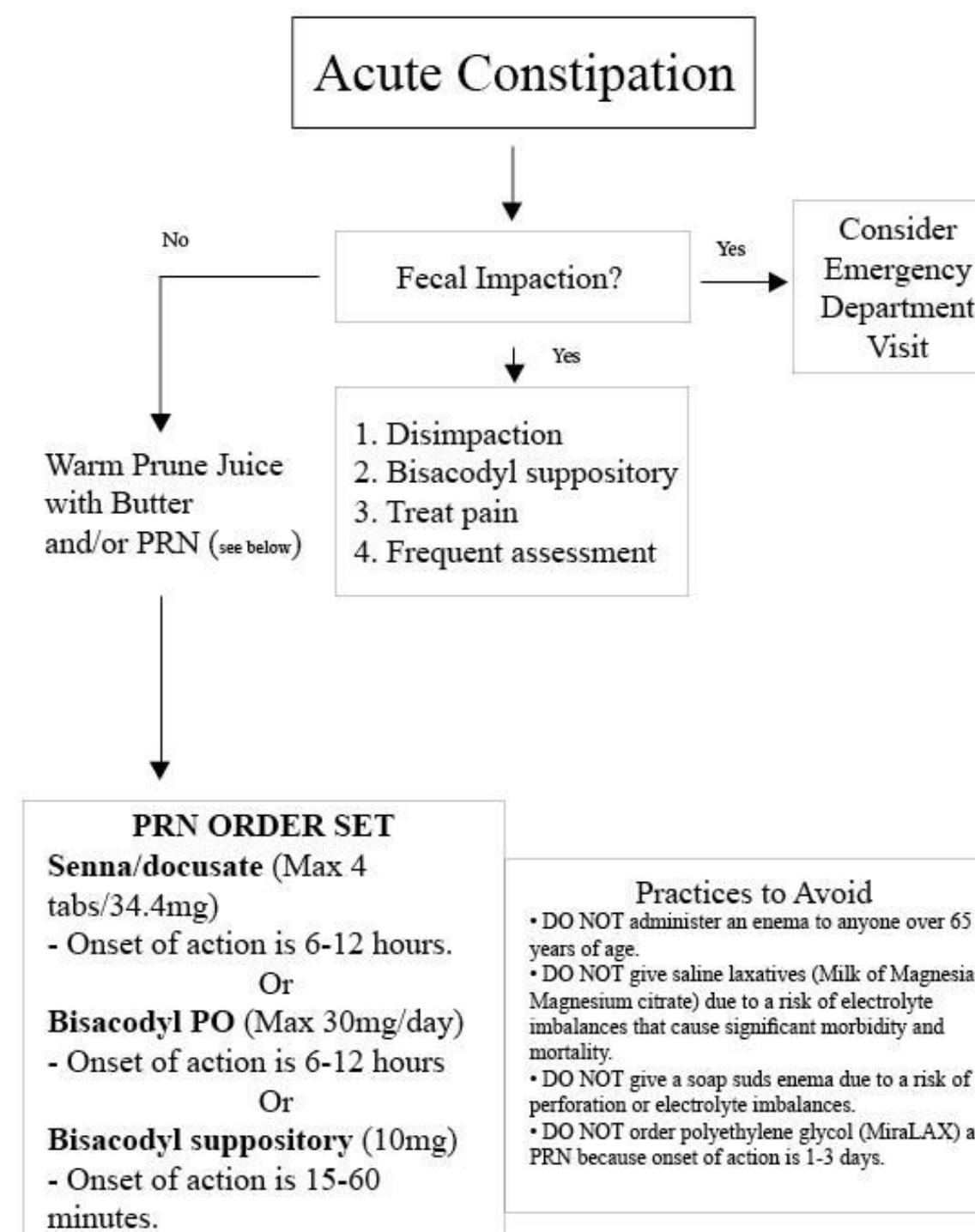
Behavior Changes Associated with Constipation

- Anorexia / change in appetite
- Change in bowel habit
- Attempting to get of bed unsafely
- Acute confusion
- Depression / anxiety
- Moaning



Food	Fiber Content
1 bowl of high fiber cereal	5.0-14.3g
1 cup of bean (kidney, navy, pinto)	5.7-8.0g
1 medium sized pear or apple	4.0-5.5g

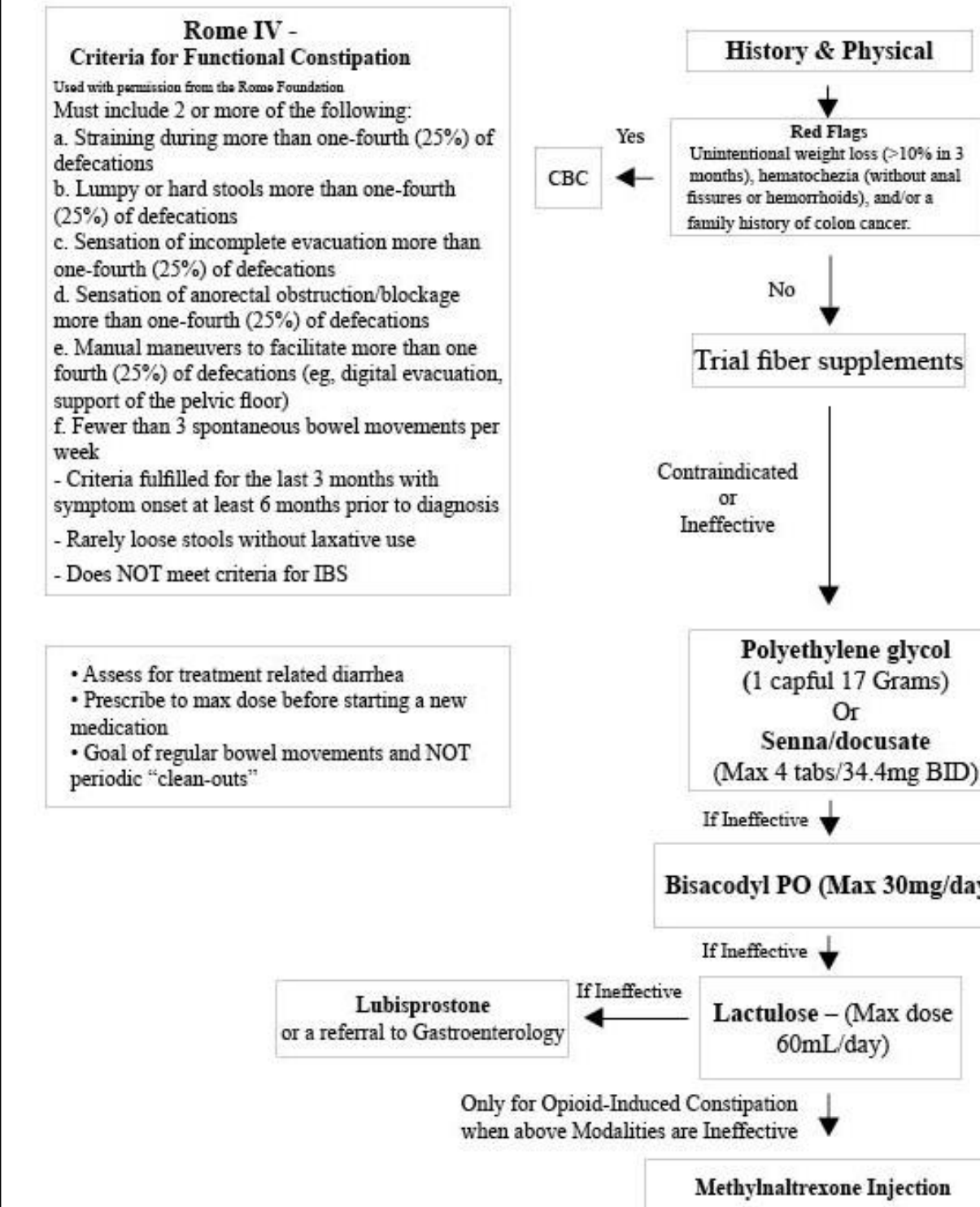
Acute Constipation



Clinical Pearls

- Hospitalization can lead to constipation – DO NOT discontinue scheduled bowel medications
- DO NOT use milk of magnesia or magnesium citrate – contraindicated in those with renal impairment, congestive heart failure, electrolyte imbalance, risk for dehydration, and hypertension.
- DO NOT use enemas or soap suds buckets - May result in perforation, electrolyte imbalances, renal failure, sepsis, and death (<4%).
- Use the digital rectal exam to assess constipation - Especially to assess for fecal impaction
- Fecal impaction can lead to severe morbidity and mortality – consider admission to the Emergency Department
- Add more prunes and fiber
- Use the max dosage of medication before attempting another medication
- The goal should be regular bowel movements - Avoid periodic cleanouts.

Chronic Constipation



Contact information

Georgiana C. Hogan DNP, FNP-BC

Georgiana.Hogan@va.gov

hogang@etsu.edu

Phone (828) 337-3408