



IMAGE AWARENESS WELLNESS INSTITUTE

Constipation

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April 2012

Volume 8: Issue 4

THE SILENT MALADY

Constipation is a disorder which is rarely talked about and which patients often do not share with their health care providers. As many as 26% of elderly men and 34% of elderly women are constipated.

David Reuben, M.D., wrote,

“Constipation has the dual distinction of simultaneously being the most common and the most neglected affliction of modern times.”

“...even the most prestigious medical works underestimate the importance of the malfunction.”

Dr. Reuben’s interest in the problem of constipation was triggered by the experience of watching his father die slowly of cancer of the colon over a period of five years. Being a physician, he saw that his father was treated by the finest physicians he could find. He made sure they used the most advanced medical techniques and procedures available at the time.

The cause was hopeless as the cancer progressed relentlessly. A number of the health problems which result from chronic constipation are irreversible or reversible with only great difficulty.

Reuben comments that he could not find any physicians who could tell him how his father’s cancer could have been prevented.

My grandmother died from cancer

of the colon and she received the same treatment experienced by Reuben’s father--surgical removal of the tumor and a good part of the large intestine. My grandmother was equipped with the infamous “bag.” The treatment is accompanied by a good deal of emotional trauma by the patients. All this suffering is accompanied by huge medical costs.

Reuben concluded that his father’s life could have been saved by the addition of a generous quantity of nothing more than fiber to the diet. Prevention would have cost only pennies a day compared to the massive cost of treating cancer of the colon.

One should think of the measures to prevent constipation as inexpensive health insurance. A great many diseases can arise from chronic constipation.

The following discussion will focus on research which appears in the medical literature. The medical literature says almost nothing about the B complex vitamins and constipation. I think this may be an oversight. I remember seeing the digestive tract



of a rat deprived of vitamin B5. The muscles required for peristalsis, the worm-like motion of the digestive tract, were without tone. Lack of any nutrient required by the muscle to perform work could contribute to constipation. This could include vitamins, minerals, amino acids, and essential fatty acids.

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THE CONDITION

Constipation is characterized by infrequent bowel movements. Stools are small and hard and often passed with great difficulty. Those who suffer from the condition often feel that they have only experienced partial elimination.

Constipation is often accompanied by slow transit time. Food should move through the digestive tract over a period of 18-24 hours. Those with a sluggish transit time may have regular bowel movements, but the time food takes to transit the digestive tract may take as long as 3-5 days or even longer. This is highly undesirable.

Conventional treatment for constipation and sluggish transit time often involves the use of medications which include bulking agents, stool softeners, and laxatives.

FIBER

Fiber is often helpful for constipation and its use is supported by a good deal of research. Some people do not respond well to fiber if they have structural abnormalities of the digestive tract or other problems.

Fiber retains water in the stool and also bulks up the stool. The pressure of a bulky stool is one of the primary triggers for the process of contraction of the muscles which cover the intestines.

Research has used a variety of fibers including corn and wheat bran and psyllium seed husks. Amounts of fiber used have varied from 10 to 30 grams a day.

Use of multiple sources of fiber is often more helpful than a single type of fiber. While we think of fiber as a single entity, in reality there are a number of different types of fiber with different properties.

Even the physical properties of the same type of bran can exhibit different properties. For example, finely milled bran as found in common breakfast cereals can not hold as much water as coarse, unprocessed bran. The latter is more effective for treating constipation.

Corn bran appears to be more effective than wheat bran because it is higher in fiber and the fiber is less susceptible to degradation in the digestive tract. Psyllium is effective due

to both its fiber content and an acetylcholine-like mechanism. Prunes also stimulate peristalsis.

Konjack glucomannan, eg., GNLD Appetite Reducer, was shown to promote bowel movement by 30% and also increase beneficial flora in the digestive tract when used in modest doses three times a day for 21 days.

The fifth of one study group with the highest intake of confectionaries had a 64% increased risk of constipation and the highest intake of (white) bread increased the risk 41%. The highest intake of rice decreased risk by 41% and the highest intake of pulses reduced risk by 23%.

When using fiber, it is advisable to add it to the diet slowly and in divided doses. Fiber is likely to increase gas formation in the digestive tract for the first few weeks after it is added to the diet, particularly if excessive quantities are added to the diet too rapidly.

Some types of fiber will bind minerals and make them unavailable to the body. It never hurts to supplement the diet with trace minerals when using fiber supplements for a prolonged period of time.

High fiber foods can also be added to the diet. Foods high in fiber include beans, grains, nuts, fruits and vegetables.

Children with recurrent abdominal pain, with or without constipation, were found to have lower fiber intake than controls with no abdominal pain. The recommended intake of fiber for children is the current age plus 5 grams.

GNLD Appetite Reducer and All Natural Fiber Food and Drink Mix can be used to augment one's fiber intake. Both provide a variety of different kinds of healthy fiber.

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How Fiber Works

Bacteria act upon fiber in the digestive tract producing a variety of acids including butyric and propionic acids. These acids act as mild natural laxatives. They also provide nourishment for the cells that line the colon promoting the health of the digestive tract. Lignin, one type of fiber, balances the laxative effects of other fibers and prevents diarrhea. For this reason, it is important to obtain a wide variety of fibers rather than just a single type.

Dehydration

Fiber can create constipation rather than resolve it if the fiber absorbs a lot of water and the digestive tract becomes dehydrated. Sometimes simply drinking adequate water will resolve a problem with constipation if an individual is chronically dehydrated.

Foods with high water content may also benefit constipation. One study found an inverse association between water intake from foods and constipation. The fifth of the study group with the highest intake of water from foods had a 23% reduced risk of constipation.

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Magnesium and Antacids

Magnesium is a natural laxative. The mineral also provides the energy necessary for the proper functioning of muscles. The fifth of a study group with the highest magnesium intake showed a 21% reduced risk of constipation.





By contrast, constipation is a well-known side effect of antacid supplementation. Many forms of calcium supplementation act as antacids as well.

Dr. Hugh Tuckey reported that low hydrochloric acid production could delay the emptying of the stomach leading to a sluggish bowel. Hydrochloric acid also promotes the release of bile which promotes the worm-like motion of the small intestine.

GNLD Chelated Cal-Mag provides calcium and magnesium in the optimal 2 to 1 ratio and in a form which does not act as a powerful antacid. If hydrochloric acid is low, GNLD has a supplement called Betagest which provides natural hydrochloric acid from beet stems and beet roots. It has a slow release and targeted delivery for optimal benefit.

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Probiotics or Acidophilus

A number of years ago a woman came into our office complaining of chronic constipation. She tried all manner of supplements including fiber with no significant improvement. This woman had spent time in

a mental institution and believed that the suffering caused by the chronic constipation had contributed to her institutionalization. She finally tried the GNLD Acidophilus Complex and within a few days her elimination became normal. She was thrilled, began to socialize, and was married a few months later.

Probiotics may be of particular benefit for elderly individuals suffering with constipation. In one study the combination of prunes, yogurt, and flaxseed significantly improved elimination.

Another study involved supplementing the elderly with lactic acid bacteria such as acidophilus in supplement form. The subjects were given the supplements 30 minutes after breakfast and dinner. Chronic constipation improved significantly.

Probiotics have also been shown to improve constipation in children (about 7 years old), increasing stool frequency and decreasing abdominal pain and incontinence.

One common cause of constipation and disturbed intestinal flora is the use of antibiotics. Use of these medications should be followed with supplementation to replace the beneficial bacteria in the colon.

GNLD Acidophilus Complex provides the highest quality beneficial bacteria with a gel guard technology to assure that the highest quality beneficial organisms will be delivered to specific locations in the digestive tract where they provide optimal benefit. No other product comes close in effectiveness.

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Foods and Allergy

Allergic responses to a wide spectrum of foods has been observed to cause constipation. Sensitivity to cow's milk is a common cause of chronic constipation, especially in young children. This sensitivity can not always be detected by classic allergy tests, so simple trial of avoidance may be appropriate.

Some have suggested that opioid or a drug-like effect is responsible for some of the constipation induced by foods like milk and wheat. Digestion of these foods results in compounds with opioid activity like morphine.

Opioids slow down intestinal motility and slow transit time. The intestinal wall is loaded with opiate receptors. Research has shown that administration of an opiate antagonist can reverse chronic constipation in some patients where there was no obvious cause for the problem other than opioid effects.

Consumption of large quantities of tea has been shown to slow intestinal transit time and to cause severe constipation in some people.

The best means of determining whether foods are responsible for constipation is to eliminate the foods from the diet for a period of time to see if the chronic constipation problems are resolved.

Prunes and prune juice have long been used to relieve constipation. In one study 96% of a group of elderly patients saw their constipation improve with consistent ingestion of prune whip.

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Pharmaceutical Drugs

A number of pharmaceutical drugs including antibiotics, discussed earlier, and SSRI medications can cause constipation. SSRI (serotonin reuptake inhibitor) medications are a particular concern and can cause either loose stools or constipation.

Gershon notes that it has been known since 1981 that the gut produces very nearly all of the body's serotonin. He wrote, "While the effects of SSRI's on mood can be uplifting and wonderful, their effect on the gut can be a real downer. When a person first begins taking them, SSRIs are very likely to cause nausea and even vomiting. The SSRI-induced intestinal disturbance can then progress on to diarrhea and finally to constipation. It seems as if the SSRIs cause the poor bowel to writhe, then churn, and finally to freeze up....Considerable attention has thus been paid by chemists to separate the gastrointestinal 'side effects' from the antidepressant 'direct effects' of SSRIs."

It is unfortunate that so many medications help deal with one symptom, but then can create another symptom which may require yet another drug. It can easily become a pharmaceuti-

cal merry-go-round.

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PREVENTION

Prevention of constipation protects from a number of other diseases. It decreases risk of heart attacks, cancers of the digestive tract, diverticulosis, appendicitis, hemorrhoids, varicose veins, phlebitis, and obesity.

The best means of detecting constipation or sluggish bowel is to determine the transit time required to move food from the mouth through the entire digestive tract. This can be determined by consuming cochineal, charcoal, or corn on the cob with a meal. Determination is made of how



long it takes these substances to move through the digestive tract. A healthy transit time is 18-24 hours. A significantly longer time can indicate a sluggish bowel, while a shorter time can indicate diarrhea.

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