

GENERIC NAME	BRAND NAME	
Cholestyramine	Questran®	Hypocholesterolemic agent, bile acid sequestrant Routine use of a stool softener should be considered, particularly in patients with heart disease
Clonidine	Catapres®	Antihyperintensive, centrally acting antiadrenergic. Less than 5%
Levodopa	Dopar	Antiparkinsonism. Controls Parkinson's disease symptoms. 5-15% (Nauseas and Vomiting)
Verapamil	Calan®	Around 10-20%
Codeine containing	Phenergan® w/ codeine	
Opioids		disorganization of peristalsis, spasm of sphincters, a decrease in gastric secretions
Iron Supplements		
NSAIDs		
Psychotropic Drugs		
Alprazolam, SSRI, TCA		15 to 25%
Bromocriptine	Parlodel®	
Carisoprodol	Soma®	Skeletal muscle relaxant, centrally acting.

Constipation

Constipation is a common complaint in the Medicine floors and the cause is multifactorial. The dietary restriction of high potassium fruits and vegetables decreases the fiber content of food ingested, fluids are restricted, inactivity, and medications such as aluminum and calcium phosphorous binders, iron supplements, and narcotics can cause constipation.

TREATMENT PROTOCOL GUIDELINE

- 1) Increase dietary fiber, refer for dietary consult
- 2) Encourage patient to exercise regularly, if able

Maintenance laxatives/softeners

- 1) Colace 100mg orally BID.
- 2) Lactulose 15-30cc BID-QID
- 3) Sorbital 30 ml BID-QID
- 4) Senna up to 8 tabs per day (BID dosing)

Rescue laxatives (daily use either increases risk of laxative dependence or electrolyte abnormalities)

- 1) Milk of Magnesia after breakfast
- 2) Fleets enema x 1. (avoid in patients taking prednsione)
- 3) Dulcolax 5-15mg orally per day
- 4) **Black** and White (5 and 30 ml)

Once the constipation is resolved, patients should be on a maintenance dose (or increased dose) to prevent constipation from reoccurring.

FOR SEVERE CONSTIPATION:

- 1) Bisacodyl 10 mg suppositories
- 2) Tap water enemas (high volume enemas can increase efficacy)
- 3) Evacuation Protocol
 - a. Mg Citrate X 1
 - b. Enemas (e.g. Fleet Enema) twice daily for 3 days.
 - c. Polyethylene glycol 4-8 Liters per day until clean

Contraindicated in Bowel Obstruction, Fecal Impaction

- 4) Avoid laxatives containing magnesium, citrate, or phosphate in **ESRD patients**

NARCOTIC INDUCED CONSTIPATION

Step 1

Senna-S 1 tab po BID

Step 2

Senna-S 2 tab po BID

Lactulose or Sorbitol 15 ml BID

Step 3

Senna-S 3 tab po BID

Lactulose or Sorbitol 30 ml BID

Step 4

Senna-S 4 tab po BID

Lactulose or Sorbitol 30 ml BID

Step 5

Senna-S 4 tab po BID

Lactulose or Sorbitol 30 ml BID

Milk of Magnesia after breakfast

Step 6

Senna-S 4 tab po BID

Lactulose or Sorbitol 30 ml QID

Milk of Magnesia after breakfast

Bisacodyl rectal Suppository 1 after breakfast

Step 7 (**No bowel movement in 4-5 days**)

Sodium phosphate enema or

Oil retention enema or

High-colonic tap water enema

Continue until adequate results