Constipation

(Anorectal Dyssynergia)

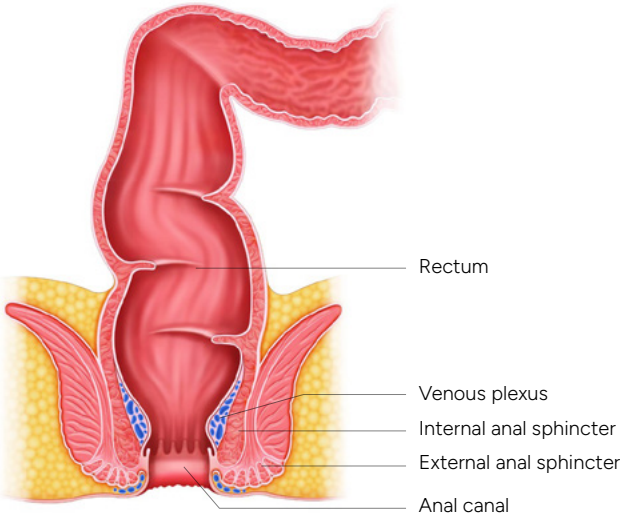
Constipation is the difficulty in excreting stool. The stool is often hard. Going to the toilet is irregular and stools can only be passed by pushing hard. Sometimes there is a feeling of not being able to defecate completely.

Anatomy and Function of the Rectum

The rectum is located above the anus in the small pelvis. An internal and an external sphincter muscle ensure that no stool is released involuntarily.

The internal sphincter keeps the anal canal closed at rest. It is helped by a venous plexus that acts like a soft cushion to provide an additional seal. The external sphincter can be controlled voluntarily; it can actively hold back when there is an urge or relax when we are on the toilet.

Normally, the rectum is empty. When it fills up, we feel the urge to defecate. Only then a bowel movement is possible. A soft but formed stool is easier to pass than a hard stool.



Possible Causes of Constipation

1. Stools that are too hard make elimination difficult. This is called constipation: a diet with little fiber, insufficient fluid intake or lack of exercise can make the stool hard. Delaying or missing the „right" time for a bowel movement is also a common cause. Less commonly, slow bowel movements or bowel disease are causes.

2. Insufficient release of the sphincter muscle. This is referred to as dyssynergia: the sphincter muscle does not relax enough or at all when on the toilet, making defecation more difficult.

Pelvic Floor Physiotherapy

In the case of constipation, pelvic floor physiotherapy is used to develop favorable behavior around bowel movements. This includes achieving a favorable stool consistency, correct posture on the toilet and the correct pushing maneuver. If the sphincter muscle does not release sufficiently, the pelvic floor physiotherapist examines it closely and work on training timely relaxation and release.

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