

SPASTIC BOWEL Upper Motor Neuron

- Injuries above T12
- Routine is usually done EVERY OTHER ĎAY
- Keep stool soft
- Often requires stimulation with gloved finger and/or suppository

KEEP A ROUTINE

A routine will decrease chances of accidents, loose stools & constipation

- Find a time that works for YOU!

- Complete routine in less than 1 Hr



AUTONOMIC DYSREFLEXIA (AD)

• May occur in injuries at or above T6

• A sudden increase in Blood Pressure



- Symptoms may include pounding headaches, sweat-ing, redness of face and neck
- Often caused by *A full bowel *Digital stimulation

Regular movement and activities can help bowel management

- Weight shift
- Transfers
- Sports
- ROM
- Abdominal massage

Created by Mauricio Gomez and Julienne Daos in collaboration with GF Strong SCI Educators, November 2014

BOWEL MANAGEMENT FOR SCI

What can **YOU** do....

KNOW THE ACTION OF YOUR MEDICATIONS

Stimulants

Stool Softners

Suppositories

Do bowel care at same time of the day
Bowel care is best 30 min after meals



MAINTAIN ACTIVITY

Spastic Bowel

EAT AND DRINK WELL

Know how different foods affect your bowel routine

• How much fibre do you need? • Drink 2L a day (water is best)

Flaccid Bowel

T12



G.F. Strong Rehab Centre

• 8-12 hrs before planned BM

Taken daily or as needed

Bulking AgentsTaken daily or as needed

• Use 10-30 min before planned BM

Enjoy a variety of foods from the four food groups.

FLACCID BOWEL Lower Motor Neuron

• Injuries below T12

- Routine is usually done DAILY or TWICE A DAY
- Keep stool firm
- Often requires removal of stool with gloved finger

TIPS

• When making changes to your routine: *keep a record *make changes gradually, trying one change at a time

• Know how other medications affect your stool *e.g. Pain meds, Antibiotics

 Routinely check your stool for consistency or issues

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