

Research shows prescribing stool softeners isn't effective in easing constipation for palliative-care patients

April 22 2013, by Raquel Maurier

(Medical Xpress)—End-of-life patients typically struggle with constipation caused by the narcotics they are given to alleviate their pain, so doctors prescribe a stool softener called docusate twice a day to alleviate this uncomfortable problem. But new medical research from the University of Alberta shows this practice isn't effective in dealing with constipation in palliative-care settings.

Faculty of Medicine & Dentistry researchers Rick Spooner, Olga Szafran, Yoko Tarumi and Mitchell Wilson recently published their findings in the peer-reviewed *Journal of Pain and Symptom Management*. Spooner and Szafran both work in the Department of Family Medicine, Tarumi works in the Department of Oncology and Wilson is a current medical student.

Spooner says similar evidence published years ago suggested that patients in long-term care facilities didn't benefit from stool softeners, so many such facilities abandoned the practice. Spooner and his colleagues wanted to know whether the situation was similar for palliative-care patients.

"No one ever questioned the effectiveness of administering docusate to palliative-care patients," says Spooner. "Our research demonstrated there was no effectiveness to the practice. How many other things are we commonly doing in palliative medical practice where we are going on



belief and tradition, instead of evidence?"

Szafran noted their research showed no difference in stool frequency or volume between palliative-care patients who received the stool softeners and those who didn't.

In total, 74 patients took part in the 10-day randomized, double-blind, placebo-controlled trial in palliative-care settings in Edmonton.

Docusate pills are large and can be difficult to swallow, so making gravely ill patients take awkward and ineffective medication that doesn't improve their quality of life doesn't make sense, says Spooner. Because nurses have to administer the medication, reducing or stopping use of the stool softener could also mean time and cost savings for the health-care system.

The research group noted trying to pinpoint best medical practices in the palliative-care population is challenging. Little research exists in this area because most patients are only in such facilities for a limited number of days. The patients or their families can be reluctant to take part in research; others pass away before completing studies.

Provided by University of Alberta

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