

LAXATIVES (Local)

Bisacodyl

Oral%GA204

Rectal%RS300

Category

Indications

Accepted

Constipation (prophylaxis)%Oral bulk-forming, lubricant, and stool softener laxatives are indicated prophylactically in patients who should not strain during defecation, such as those with an episiotomy wound, painful thrombosed hemorrhoids, fissures or perianal abscesses, body wall and diaphragmatic hernias, anorectal stenosis, or postmyocardial infarction .[An oral hyperosmotic laxative (polyethylene glycol 3350) is indicated for the prevention of constipation. 102]

Constipation (treatment)%Oral laxatives are indicated for the short-term relief of constipation. Oral bulk-forming laxatives, stimulant laxatives, and carbon dioxide-releasing suppositories are indicated to facilitate defecation in geriatric patients with diminished colonic motor response. Oral bulk-forming laxatives and stool softener laxatives are preferred to treat constipation that may occur during pregnancy and postpartum to help re-establish normal bowel function or to avoid straining if hemorrhoids are present. 14 An oral hyperosmotic laxative (polyethylene glycol 3350) is indicated for the treatment of occasional constipation. 101, 102

In severe cases of constipation, such as with fecal impaction, mineral oil and stool softener laxatives administered orally or rectally are indicated to soften the impacted feces. To help complete the evacuation of the impacted colon, a rectal stimulant or saline laxative may follow.

Bowel evacuation%Pre- and postpartum: Carbon dioxide-releasing suppositories are indicated to evacuate the colon in preparation for delivery and for a few days after to help re-establish normal bowel function.

Preoperative and

Pre-radiography: Oral or rectal stimulant and oral saline laxatives, rectal preparations of glycerin, and carbon dioxide-releasing suppositories are also indicated to evacuate the colon in preparation for rectal and bowel examinations, and elective colon surgery.

Parasites, intestinal (treatment adjunct): Oral saline laxatives are indicated to accelerate excretion of various parasites including nematodes, after anthelmintic therapy.

Toxicity, nonspecific (treatment adjunct): Oral saline laxatives are also indicated to hasten excretion of poisonous substances (except acids or alkalies) from the gastrointestinal tract.

Laxative dependency (treatment)%Glycerin suppositories are indicated temporarily to re-establish normal bowel function in laxative-dependent patients.

Hyperacidity (treatment)%See Magnesium Hydroxide and Magnesium Oxide, in Antacids (Oral-Local) .

Hyperammonemia (prophylaxis and treatment)¾Lactulose is indicated for the prevention and treatment of portal-systemic encephalopathy, including the stages of hepatic pre-coma and coma.

Biliary tract disorders (treatment)¾Dehydrocholic acid is indicated as an adjunct in conditions involving the biliary tract.

Diarrhea (treatment)¾Polycarbophil is indicated in the treatment of diarrhea associated with irritable bowel syndrome and diverticulosis, and acute nonspecific diarrhea. [Psyllium hydrophilic mucilloid is used in the treatment of cholaretic diarrhea and diarrhea caused by vagotomy, small bowel resection, or disease of the terminal ileum.]

Bowel syndrome, irritable (treatment adjunct)¾ Polycarbophil is indicated [and other bulk-forming laxatives are used] to relieve constipation associated with irritable or spastic bowel.

[Hyperlipidemia (treatment)]¾Psyllium hydrophilic mucilloid is used as an adjunct to diet in the treatment of mild to moderate hypercholesterolemia. 8, 9, 15

Precautions to Consider

Carcinogenicity/Tumorigenicity

Chronic administration of high doses of danthron to mice and rats has resulted in the development of intestinal and liver tumors. Danthron toxicity in humans has not been demonstrated; however, in the U.S., because of the potential risk to humans, the FDA has banned all manufacturing, relabeling, repackaging, and further distribution of human drug products containing danthron.

Pregnancy/Reproduction

Hyperosmotic¾

Saline: Sodium-containing preparations may promote sodium retention with resultant edema.

Polyethylene glycol 3350: Studies have not been done in humans. Studies have not been done in animals. FDA Pregnancy Category C.

Lubricant¾Repeated oral use of mineral oil may decrease absorption of foods, fat-soluble vitamins, and some oral medications. Hypoprothrombinemia and hemorrhagic disease of the neonate have occurred following chronic use during pregnancy.

Stimulant¾Castor oil is contraindicated since its use often results in pelvic area engorgement, which may initiate reflex stimulation of the gravid uterus.

Breast-feeding

Stimulant¾Cascara sagrada and danthron preparations may be distributed into breast milk. The amounts are reportedly large enough to produce loose stools in the infant, although this still remains controversial. Phenolphthalein in laxative products is also distributed into breast milk but with no reported ill effects. 12