

Chronic constipation: Tailored diagnostics and management.

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Introduction

This systematic review provides an updated overview of diagnostic approaches and management strategies for chronic constipation. It emphasizes individualized treatment plans based on underlying causes and patient characteristics, covering lifestyle modifications, pharmacotherapy, and advanced interventions to offer evidence-based recommendations for clinical practice [1].

This article offers a pediatric perspective on the Rome IV criteria for functional gastrointestinal disorders, including functional constipation. It highlights the diagnostic principles and clinical utility of these criteria in children, emphasizing a comprehensive approach to assessment and guiding appropriate management strategies for pediatric patients [2].

This update reviews the latest pharmacological treatments available for chronic constipation, discussing the mechanisms of action, efficacy, and safety profiles of novel agents. It provides insights into the selection of appropriate medications based on patient characteristics and underlying pathophysiology, guiding clinicians in managing refractory cases [3].

This review examines the efficacy of lifestyle and dietary interventions in managing chronic constipation, including fiber intake, fluid consumption, exercise, and behavioral strategies. It synthesizes evidence to support practical recommendations for patients, highlighting the importance of these foundational measures before escalating to pharmacological treatments [4].

This article delves into the complex pathophysiology of chronic constipation, exploring various mechanisms such as slow transit, defecatory disorders, and visceral hypersensitivity. It discusses the genetic, environmental, and microbial factors that contribute to the condition, providing a deeper understanding of its heterogeneous nature to inform targeted therapeutic approaches [5].

This article focuses on the specific challenges and management strategies for constipation in older adults. It addresses common causes in this population, including polypharmacy and reduced mobility, and outlines a comprehensive approach from non-pharmacological interventions to appropriate laxative use and spe-

cialized treatments, considering comorbidities and quality of life [6].

This article explores the intricate relationship between pelvic floor dysfunction and chronic constipation, particularly focusing on defecatory disorders. It outlines diagnostic methods, including anorectal manometry and balloon expulsion tests, and discusses therapeutic strategies such as biofeedback therapy, physical therapy, and surgical interventions for managing these complex conditions [7].

This review investigates the role of the gut microbiota in the pathophysiology of constipation, highlighting dysbiosis and its impact on gut motility and sensation. It explores potential therapeutic implications, including probiotics, prebiotics, and fecal microbiota transplantation, suggesting new avenues for personalized interventions based on microbial profiles [8].

This study evaluates the significant negative impact of chronic constipation on patients' quality of life and its associated healthcare resource utilization. It quantifies the burden of the condition in terms of physical symptoms, psychological distress, and economic costs, underscoring the importance of effective management to improve patient well-being and reduce healthcare expenditure [9].

This systematic review and meta-analysis assess the efficacy of biofeedback therapy for chronic constipation, particularly for defecatory disorders. It compiles evidence from randomized controlled trials, demonstrating the significant benefits of biofeedback in improving bowel function and reducing symptoms, positioning it as an effective non-pharmacological treatment option [10].

Conclusion

Chronic constipation is a multifaceted condition that demands updated diagnostic approaches and tailored management strategies. Treatment protocols prioritize individualized care based on underlying causes and patient characteristics, encompassing lifestyle modifications, diverse pharmacotherapy options, and advanced interventions. For pediatric patients, the Rome IV criteria for functional gastrointestinal disorders provide essential diagnostic principles. The complex pathophysiology of chronic constipation in-

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volves slow transit, defecatory disorders, and visceral hypersensitivity, with growing recognition of genetic, environmental, and microbial factors, including the gut microbiota's role in dysbiosis. Lifestyle and dietary interventions, such as adequate fiber and fluid consumption, are crucial foundational measures. Newer pharmacological agents offer insights into managing refractory cases, while non-pharmacological approaches like biofeedback therapy demonstrate efficacy for defecatory disorders. Specific patient groups, notably older adults, require specialized management due to factors like polypharmacy and decreased mobility. Ultimately, effectively managing chronic constipation is vital, given its significant negative impact on patients' quality of life and considerable healthcare resource utilization.

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