

# Bowel Problems After Radiation

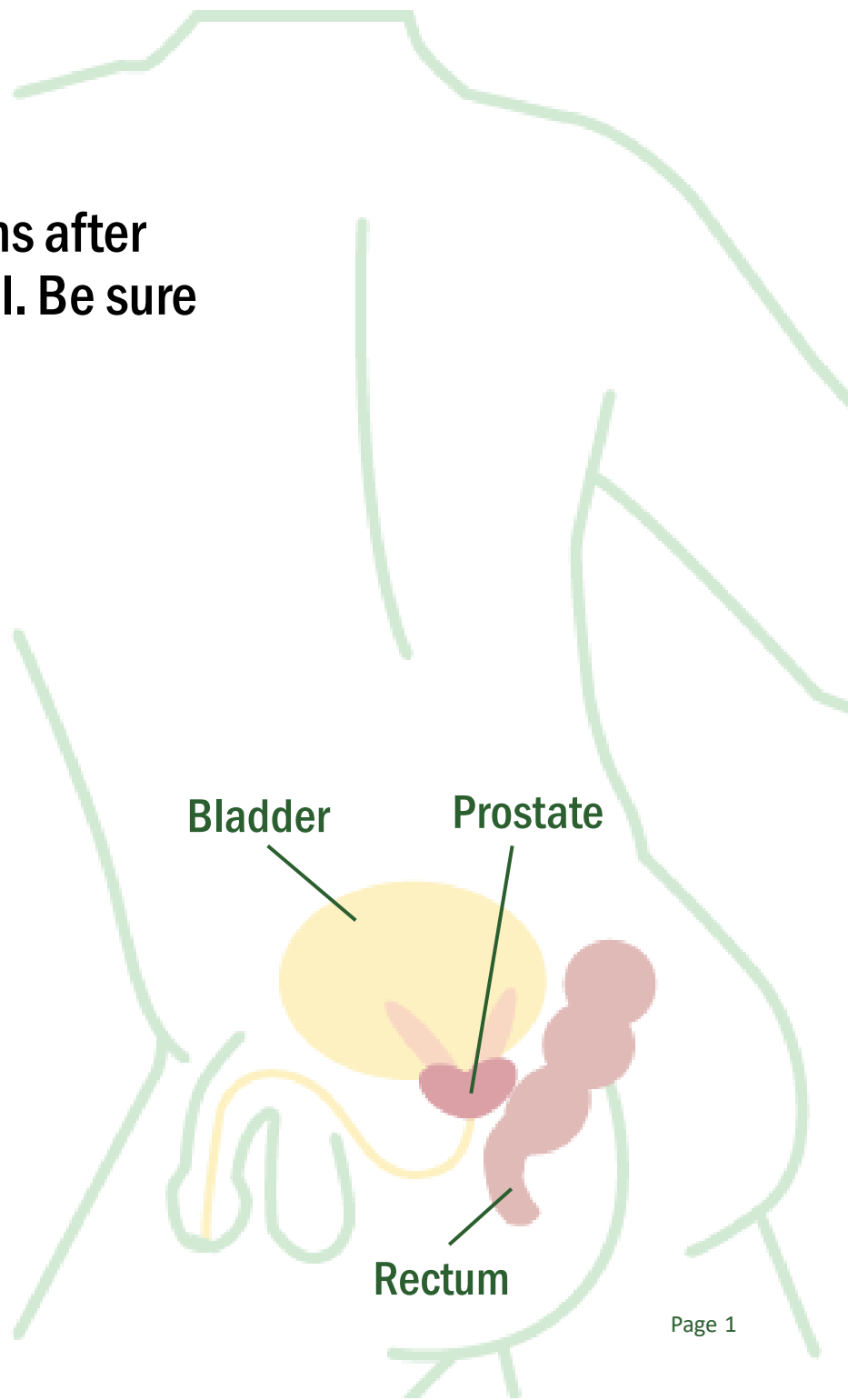
**If you have bowel problems after radiation, it is not unusual. Be sure to ask for help.**

**How does radiation treatment cause bowel problems?**

Radiation kills cancer cells. When radiation is used to treat prostate cancer, it can also affect normal cells in nearby areas. These include the bowel (your intestines or guts) and the rectum – the end of the intestines that has an opening out of the body. Body waste is stored in your rectum until it passes out as a bowel movement.

**Problems can start during radiation and last for weeks or months after treatment is finished.**

For some men, bowel problems start during the treatment. While these problems may persist for the duration of treatment, they often go away within a few weeks of completing treatment. Rarely, symptoms can persist (or begin) even months to years after treatment ends.



## How to Manage and Ease Symptoms



Sometimes radiation for prostate cancer can cause side effects to the bowel, including:

- Abdominal cramping.
- Very loose or runny stools (diarrhea).
- Feeling of pressure to have a bowel movement right away (urgency).
- Burning, tenderness or pain.
- Gas.
- Mucus discharge that is thick and stringy.
- Bleeding with bowel movements or blood in stools.

You may feel embarrassed that your body behaves in this way. Don't let this stop you from asking your health care team for help. Doctors and nurses deal with this every day.

## How can I manage bowel problems?

Keep a record of your problems for one to two weeks. Write down:



**Symptoms** such as pain, gas, cramping or skin irritation around your rectum. Record the severity (mild, moderate, severe), when they occur, and what seems to make the symptoms better or worse.



**Problems** with loose, runny stools (diarrhea). Describe your stools as well as you can. Take notes on how often you go and whether there is blood or mucus in them.



**Food or activities** you think may cause the problem. Keep a record of your meals and snacks.

When you visit your doctor or nurse, take your record. It will help them help you. [Click here to download an NIH stool diary](https://bit.ly/3luz8md) (URL:<https://bit.ly/3luz8md>).

## Talk with your doctor or nurse.

Bowel problems may embarrass you, but keep in mind that doctors and nurses talk to patients with these problems every day. Take your symptom record to share with your health care team. Tell them what you have done to treat the problem(s).

If your primary problem is diarrhea, they may suggest certain over-the-counter or prescription medicines.

Other medicines can relieve cramping and pain in the abdomen or rectal area. Certain creams can ease skin irritation and soreness around the rectum. Be sure to mention each of your symptoms and ask for what you need.

There may be other (medical) treatments to reduce the risk of bowel issues during and after radiation – ask your provider if there are options that might work for you.

Consider making changes in your eating habits and the foods you eat.



### Eating habits that may help with bowel problems:

- Eat five to six small meals a day instead of three big meals.
- Eat foods at room temperature. Very hot and cold foods can be hard on the bowels.
- Eat slowly so you swallow less air.
- Don't chew gum.

### Foods to eat that are easy on the bowels:

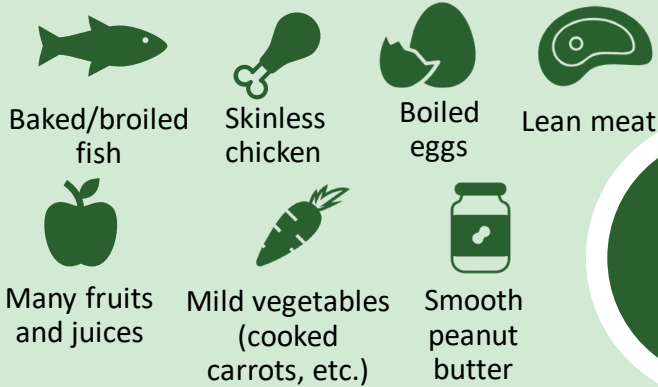
- Baked or broiled fish, skinless chicken, lean meats.
- Mild processed cheese.
- Boiled eggs.
- Smooth peanut butter.
- Fruits such as bananas, applesauce, canned peaches and pears, peeled apples, apple and grape juice.
- White bread or toast, rice, noodles, cream of wheat.
- Potatoes (baked, broiled, or mashed) and well-cooked mild vegetables such as green beans, carrots, asparagus tips, squash. Remember to avoid raw vegetables.

### Foods that may bother the bowels or cause gas:

- Very spicy foods, such as those made with pepper, chili powder, curry and cloves.
- High-fiber foods such as whole grain bread, bran cereals, nuts, seeds, popcorn, fresh fruits and dried fruits.
- High-fiber vegetables such as broccoli, cabbage, cauliflower, peas, corn, dried beans, raw vegetables.
- Fried, greasy or fatty foods such as French fries, chips, pastries, gravies.
- Most milk products, if you are sensitive to them. Doctors call this lactose intolerance. Usually yogurt, buttermilk and nutrition drinks (like Ensure or Boost) are okay.

## Dietary Suggestions

### OK to Eat:



### Avoid Eating:



**Drinking eight to 10 glasses of water each day will help you and your body feel better.**

However, if you have heart or kidney problems, ask your doctor or nurse how much you can drink.

If you have diarrhea, you will lose a lot of fluid that needs to be replaced. You may also need to replace sodium and potassium — minerals important to your body. Ask your doctor if replacing these minerals is right for you. Your health care team may recommend drinks such as Gatorade, which contain these minerals. They may also suggest eating foods that have potassium such as bananas, potatoes, red meat, and vegetable juices. Limit caffeine. Caffeine can irritate the bowels and make you lose fluids. Avoid or drink only small amounts of coffee, tea, or soft drinks.

If you have more than five stools a day or diarrhea that lasts more than one day, write down how much you are consuming.



**8-10 cups  
per day**

## Helpful Tips to Ease Symptoms

Other tips that will help you feel better:



**Cut down or don't use alcohol and tobacco.** These may irritate the bowel and may make your diarrhea worse.



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**Use comfort measures such as a warm bath to soothe a sore bottom.** A hot water bottle wrapped in a towel and placed on your belly may help with cramps. Over the counter gas aids may also be beneficial. Make sure you tell your health care provider about every medicine you take.



**Gently clean and dry after each bowel movement using mild baby wipes or just plain water.** Apply soothing lotions or ointments after cleaning and drying. Ask your doctor or nurse what products they would suggest.

### **Bleeding and rectal pain.**

Sometimes you can develop bleeding or rectal pain months to years after completing radiation treatment. This can be alarming when first noticed but most often this is normal and very treatable. This may be related to scar tissue that has developed in the rectum as the result of radiation treatment to the nearby prostate. This scar tissue doesn't stretch as well as the normal tissue and can tear and bleed with bowel movements. Additionally, the bleeding can be caused by passing hard stools. Eating the diet mentioned earlier should help with these symptoms. Over-the-counter stool softeners (like docusate sodium) and hemorrhoid creams (like Preparation H) can be helpful. Let your healthcare provider know if the symptoms persist or get worse.

Sometimes the bleeding and pain can be associated with the sensation of a bowel movement, even though nothing comes out. This may require additional treatment and you should discuss this with your healthcare provider.

If the bleeding becomes severe and cannot be stopped with these other, more conservative treatments, a procedure may be needed to stop the bleeding. Talk to your health care provider if your bleeding becomes frequent (daily) or of larger volume (more than a tablespoon at a time).

### Talk to your doctor about when to start and how often to repeat colorectal cancer screening.

Colonoscopies help prevent advanced colon cancers and will also monitor for any unexplained or bothersome rectal bleeding.



### When should I see or call my doctor or nurse?

#### Call your health care team if:



The diarrhea or rectal pain does not go away.



You see red blood in the toilet or on toilet paper after a bowel movement. You should never assume that this is due to the radiation as there are other causes of bowel bleeding.



You have a fever above 100.5 degrees with diarrhea.



You have signs of dehydration such as fatigue, weakness, dizziness, dry skin, fast heart rate, and little urine (pee).

This guide contains general information and is not meant to replace consultation with your doctor or nurse.

This information was developed under guidance of the Michigan Cancer Consortium. Their effort was supported by Cooperative Agreement NU58DP006334 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

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