

Bowel problems

Lymphoma and some treatments for lymphoma can affect your digestive system, causing bowel problems such as diarrhoea, constipation and wind (flatulence). This information gives practical tips to help you cope with bowel problems.

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We have separate information about the topics in **bold font**. Please get in touch if you'd like to request copies or if you would like further information about any aspect of lymphoma. Phone 0808 808 5555 or email information@lymphoma-action.org.uk.

Lymphoma-related bowel problems

Bowel problems such as **diarrhoea**, **constipation** and **wind (flatulence)** can happen for a number of reasons, including:

- the effects of the **lymphoma** itself
- **side effects of treatment** such as **chemotherapy**, **radiotherapy** to the tummy (abdominal) area, **targeted therapies**, anti-sickness medicines (**antiemetics**) and painkillers
- heightened **stress** and anxiety, which might both cause and worsen bowel problems
- **infection**, usually of the digestive system (gastrointestinal tract).

Bowel problems can have a significant impact on your **emotional wellbeing** – don't hesitate to ask your **medical team** for help to manage any symptoms you experience.

These side effects can have a huge impact on your social life. It is important to know that they can be quite common and that you can ask for medical help. Also, if you feel able to, tell friends and family about your condition. In my experience, people loved to help in any way, so being tasked with finding the nearest toilet and carrying the spare clothes for me went some way making them feel useful.

Debbie, affected by treatment-related bowel problems

At times, I really struggled with eating and drinking – everything tasted awful. My treatment gave me diarrhoea and, at other times, I was constipated. I was prescribed laxatives regularly. When I had neutropenia, this limited my food choices again. I had the support of a dietician and it made a huge difference. Of course, not everyone experiences these issues, but be sure to speak to your medical team if you are struggling, so that they can offer you help

Corrin, affected by treatment-related bowel problems

Diarrhoea

Diarrhoea means that your poo is more watery or runny than usual. You need to go to the toilet more often than is usual for you and might need to do so urgently or suddenly. Diarrhoea can also cause stomach (abdominal) cramps, feeling bloated or sick, and make you tired and lethargic. More severe diarrhoea can cause fever (high temperature of over 38°C). **Seek medical advice if you experience fever or chills.**

Diarrhoea can be caused by the lymphoma itself if it affects the gut. Examples of types of lymphoma where this can happen are **MALT lymphoma**, **mantle cell lymphoma** and **intestinal T-cell lymphomas** (for example **enteropathy-associated T-cell lymphoma (EATL)**). It can also be caused by treatments that damage the gut lining, such as bendamustine (a **chemotherapy** drug) and **ibrutinib** (a type of **targeted drug**). Diarrhoea can start within a few hours to a few days after having treatment. Your medical team can prescribe medication to lower the risk of it happening with your next round of treatment.

Diarrhoea caused by lymphoma or its **treatment** is usually mild and gets better once you finish treatment, often within a few days. Nonetheless, it can have a significant impact on your **day-to-day life**, particularly if you feel embarrassed about it, or anxious because of it. The loss of fluid can also cause **dehydration** and an imbalance of electrolytes (chemicals in your body), leading to symptoms such as muscle weakness, extreme tiredness (fatigue) and dizziness.

Speak to a member of your medical team if you have diarrhoea. There are **medicines** they can prescribe to help. There are also **steps you can take to help you cope with diarrhoea**.

Seek medical advice straightaway if:

- your diarrhoea goes on for more than 3 days (if you are currently having **treatment for lymphoma**)
- your diarrhoea goes on for more than 2 weeks if you are not on active treatment for lymphoma
- you have blood in your poo
- your poo is very dark brown or black
- you have a lot of painless watery diarrhoea
- your diarrhoea wakes you up
- you have persistent or severe stomach cramps
- you feel sick or have persistent vomiting (being sick) twice or more a day
- you are dehydrated, signs of dehydration include:
 - thirst
 - dark-coloured wee
 - a dry tongue
 - light-headedness
 - dry, pinched skin
- you are losing weight without trying to
- you're not able to eat
- you are becoming more and more tired or weak
- you have recently taken antibiotic medication
- you have a fever (temperature above 38°C).

Coping with diarrhoea

There are some things you can do to help yourself when if you have diarrhoea, including in relation to your **eating** and **drinking** habits, as well as steps you can take to help you **feel comfortable** in your day-to-day life and **while out and about**. Your medical team might recommend a medicine to help **treat diarrhoea**. Remember to rest when you can and get help from friends and family where possible – having diarrhoea uses up a lot of energy.

Eating habits and food that might help or worsen diarrhoea

You might not want to eat very much if you have diarrhoea. If you don't feel able to eat three main meals a day, you might find it easier to eat little and often throughout the day instead until you feel able to. You could also make some short-term changes to your diet, as outlined below.

Fibre

Usually, fibre is recommended as part of a healthy diet. It helps to stimulate the gut and move food and fluid through it. However, if you have diarrhoea, such stimulation is less helpful. Fibre can also leave behind 'residue' (undigested and unabsorbed food). It might therefore be helpful to limit your intake of fibre.

- Eat low-fibre foods, for example white bread, poppadoms, white rice, white pasta and noodles.
- Avoid foods that are high in fibre, such as wholemeal or granary bread, raw vegetables, dried fruit and potatoes with skin on.

The Hillingdon Hospitals NHS Foundation Trust produce a leaflet that suggests **foods to eat and foods to avoid if you are experiencing diarrhoea**.

Potassium

Potassium is a mineral that helps to control the balance of fluids in your body. It's also important for healthy heart functioning.

Eating foods that are high in potassium can help to replace the potassium lost through diarrhoea. Examples of such foods include bananas, nuts, broccoli, fish and chicken. The NHS website gives more **sources of potassium**.

Other foods to avoid

Some foods could worsen diarrhoea by irritating your gut and might be better avoided when you have diarrhoea. These include:

- spicy foods
- sugary and fatty foods
- citrus fruits
- dairy products
- onions.

Drinks

Aim to drink at least 2 to 3 litres (3.5 to 5.5 pints) each day, sipping little and often – this helps to replace the fluids lost when you have diarrhoea.

- Choose plain water or weak squash. Herbal tea, clear soups or broths, coconut water and **oral rehydration solutions** might also be helpful.
- Avoid drinks that could irritate your gut and worsen your diarrhoea. These include fruit juice, caffeinated drinks, fizzy (carbonated) drinks, alcohol and milk.

Feeling comfortable

Diarrhoea can cause physical and emotional discomfort. Speak to your medical team if you are worried about not making it to the toilet in time. They might be able to make changes to your medication to help.

It might also help to think about the clothes you wear, for example:

- Wear clothes on your bottom half that are easy to take down or take off if you need to go to the toilet urgently.
- Avoid fiddly zips, buttons or other fastenings.
- Have a spare pair of clothes for your bottom half ready for if and when you need to change.

Soothing sore skin

Diarrhoea can make the skin around your back passage (anus) feel sore. You could ask your medical team if they can recommend a cream to soothe the area.

You could also try the following tips:

- Wash your bottom with a mild, fragrance-free soap and water.
- Wipe your bottom clean with baby oil instead of toilet tissue.
- Have a warm bath. After washing, pat the area with a soft towel to dry it.
- Wear loose-fitting, cotton underwear to help reduce skin irritation.

When you go to bed

If you think you might have an accident while you are sleeping, you could try the following tips to help you feel reassured and more relaxed:

- Protect your mattress with a protector or plastic sheet.
- Wear a disposable waterproof (incontinence) pad.

If your diarrhoea is severe, you could talk to your medical team about the possibility of having a commode (a chair with a hidden toilet pan inside) by your bed.

Coping when you're out and about

- Find out in advance where toilets will be.
- Take toiletries such as a body spray with you to help you feel fresh.
- Carry spare clothes and a plastic bag in case of soiled clothes.
- Protect your underwear by wearing a disposable waterproof (incontinence) pad – you can buy these in a pharmacy, chemist, supermarket or online. Your hospital might also be able to give you some.

The Bladder and Bowel Community produce a **Just can't wait toilet card**. This is available as a physical card or as a digital version that you can display on your phone. The card can help you to quickly and easily communicate with others the fact that you have a medical condition and that you need to use a toilet urgently. The digital version can also help you to locate your nearest toilet facilities.

Treatment for diarrhoea

You might be given a medicine to treat diarrhoea (antidiarrhoeal medicine). Some are available to buy over-the-counter. However, it's important to seek medical advice before taking antidiarrhoeal medicines – there are different types and not all are suitable for all types of diarrhoea. Other factors might also make one type unsuitable for you, for example, any other health conditions you have, medication you're on (including your lymphoma treatment) and pregnancy. It's therefore important to seek medical advice to get treatment that's safe and effective for you. Your doctor can prescribe a suitable dose and advise you how long to take any medications for.

Loperamide is a common antidiarrhoeal medicine used to treat diarrhoea related to cancer. It slows down the movement of food through your gut. This helps your stools (poo) to absorb more water, making them firmer and reducing the frequency you need to go to the toilet. Loperamide comes in capsules, tablets, liquid medicine and 'melts' (tablets that dissolve in your mouth).

Antidiarrhoeal medicines are sometimes given alongside **oral rehydration solutions**, which help to replace sugars and salts lost with diarrhoea. They come as sachets of powder that dissolve in water to drink. You can buy oral rehydration solutions without a prescription in pharmacies, chemists, supermarkets and online. Seek advice before taking an antidiarrhoeal medicine: if you are currently having treatment, speak to a member of your medical team. If you are not on active treatment, seek advice from your GP, pharmacist or **NHS 111**.

If you are severely dehydrated, you might need hospital treatment. This involves having fluids through a drip into a vein (intravenously). You might also be given an injection with **octreotide** – a drug that increases the absorption of fluids in the gut and reduces muscle movements of the small intestine.

Constipation

Constipation means that it's difficult to poo. Symptoms can include:

- going to the toilet less than is usual for you
- straining to go to the toilet, which can lead to bleeding from your bottom (back passage)
- feeling as though you've not completely emptied your bowels after you've been to the toilet
- small, dry hard or lumpy poo

- feeling sick or bloated
- having a hard, sore or tender tummy
- loss of appetite
- stomach cramps.

Constipation can be a side effect of:

- some **chemotherapy** and **targeted drugs**
- **radiotherapy** to the pelvis or digestive (gastrointestinal) tract
- some painkillers, particularly opioids such as codeine and morphine
- some anti-sickness (antiemetic) drugs.

Having a combination of these treatments can worsen constipation.

Let a member of your medical team know if you are constipated. Depending on the cause, they might offer you a laxative medicine to help ease your constipation.

There are some **steps you can take to help you cope with constipation**. Your medical team might also prescribe a **laxative medicine** to help you go to the toilet.

Coping with constipation

In many situations, making **dietary** and lifestyle changes helps to ease constipation. We offer some general tips below, but speak to your medical team for the best advice to suit your individual situation.

Diet and nutrition

Some food and drinks can act as natural **laxatives** to help prevent or relieve constipation.

- Eat a **healthy, balanced diet** and drink plenty of fluids – aim for at least 2 litres (3.5 pints) of fluids each day. Caffeinated and carbonated (fizzy) drinks can worsen constipation so are best avoided.
- If you can, eat regularly and at around the same times each day to encourage regular bowel movements.
- Choose **high-fibre foods** to help soften your poo, such as wholegrain cereals, wholemeal bread, brown rice, wholemeal pasta, fruits, vegetables, beans, lentils and pulses.

- Eat foods that are high in sorbitol (a type of natural sugar that can help to soften poo and make it easier to pass). For example, apples, apricots, blackberries, grapes, peaches, pears, plums, prunes, raisins, raspberries and strawberries.

Lifestyle

- Build light **physical activity** into your day – even a gentle walk can help keep your bowels moving.
- Go the toilet as soon as you can when you need to – waiting can make constipation worse.
- Try to go for a poo at a regular time each day – for example, in the morning or half an hour after meals.
- Give yourself enough time and privacy to go to the toilet. Hurrying, or feeling as though you do not have privacy, can worsen constipation.
- When you sit on the toilet, try to keep your knees above your hips – it might help to rest your feet on a low footstool.
- If you have difficulty using a toilet (for example, you have limited movement or feel unsteady on the toilet), you could ask your medical team if they can refer you to an occupational therapist (OT). An OT can assess your needs and might be able to organise equipment to help you to manage your day-to-day life.
- **Manage stress** and anxiety, as these can worsen constipation.

The NHS website also a **video about how to treat constipation with diet and lifestyle factors**.

Treatment for constipation

Constipation can improve with diet and lifestyle changes and, in general, treatment isn't needed. However, your doctor might prescribe a laxative to help ease symptoms.

I experienced constipation and needing to dash to the toilet at awkward times, which was an uncomfortable side effect of treatment. This all cleared up quickly after finishing chemotherapy though.

Debbie, affected by treatment-related bowel problems

Laxatives

Laxatives are medicines to help you poo more regularly. Although some are available to buy without a prescription, it's important to seek medical advice before taking them – not all are suitable or effective in all situations, for example, if you are taking another medication.

Laxatives come in different forms. For example, you might take them by mouth (orally), for example as tablets, capsules, liquids, or 'melts' (tablets that dissolve in your mouth). You can also take laxatives as suppositories, which you place into your back passage (bottom), where they dissolve.

Suppositories can also come as a liquid that you put into your bottom. Some types might not be suitable for you. For example, if you have a:

- low white blood cell count (**neutropenia**), as this can increase your risk of developing an infection
- low platelet count (**thrombocytopenia**), so as to avoid bruising and bleeding.

If you are prescribed laxative medication, take it as it's prescribed to you. Do not stop taking it suddenly, even when your symptoms ease – ask your doctor for advice about gradually reducing your dose.

The NHS website has more information about the **different types of laxatives and how they work**. Always seek medical advice before taking laxatives.

In cases of severe constipation

If constipation is severe and ongoing, poo can build up in the large intestine, causing a blockage. Your doctor might prescribe a stronger laxative. Other options might include a:

- mini enema – where liquid is put into your back passage to soften your poo and to help empty your bowel
- manual extraction – where a trained health professional uses their hand to break up your poo and help to clear it.

Such procedures might not be suitable for you, for example, if you are neutropenic or thrombocytopenic.

I experienced some ongoing bowel problems after chemotherapy, but I found the advice of my medical team very helpful. My GP was also helpful to me after I had completed treatment.
Corrin, affected by treatment-related bowel problems.

Wind (flatulence)

When you eat and drink, you swallow small amounts of air, which builds up as gas in your digestive system. Gas is also produced in your gut as you digest your food. Passing wind (flatulence, or farting) helps to release these gases. Most people pass wind between 5 and 15 times each day.

Some **treatments for lymphoma** can cause gas to build up in your digestive system, which leads to increased wind. This isn't a serious medical problem but it can be embarrassing and uncomfortable.

Most of the time, wind doesn't need medical treatment and can be managed with **diet and lifestyle changes**. However, speak to your medical team for advice – if necessary and appropriate, they can prescribe medication to help.

Coping with wind

You might find the following tips helpful:

- Eat and drink slowly and chew your food well. This reduces the amount of air you swallow.
- Eat little and often throughout the day as this can help with digestion.
- Try adding ginger to your diet, for example, ginger beer, ginger tea, ginger biscuits, ginger cake or root ginger.
- Try drinking peppermint tea or taking peppermint oil capsules.
- Avoid foods that might worsen your wind, such as cabbage, cauliflower, broccoli, sprouts and beans such as haricot (baked) beans and pinto beans.
- Choose carbohydrates that are easy to digest, such as potatoes, rice, grapes, bananas and yoghurt.
- Avoid fizzy (carbonated) drinks.
- Avoid artificial sweeteners as these increase the production of gas in your gut.
- Limit the amount of air you swallow – avoid chewing gum, smoking, and sucking hard sweets.
- Do not smoke as this can make wind worse – if you smoke, your medical team can give **advice to help you stop smoking**.

- Take gentle **exercise** to help improve your digestion.

Treatment for wind

Your medical team might recommend something to help ease wind, for example:

- charcoal tablets, which soak up gas within the digestive system and can also help to neutralise unpleasant smells caused by passing wind
- a drug called **simeticone**, which helps wind to pass more easily through your body to relieve trapped wind, bloating and pain
- a dietary supplement of alpha-galactosidase, which might help with the digestion of carbohydrates, and therefore reduce wind.

These medicines are available without prescription **but you should always seek advice from your doctor before taking them.** This is particularly important if you are having **lymphoma treatment** because it is possible for medicines to interact with one another in unwanted ways. This could make them less effective or cause other side effects.

Frequently asked questions

Below, we answer some frequently asked questions about bowel problems related to lymphoma.

Is it OK to try over-the-counter medicines?

If you think you might like to try an over-the-counter medicine, including a natural remedy, speak to your medical team. **Even if they are available without a prescription, it's important to take the advice of a member of your medical team because some could react with other treatment or medication.**

Can probiotics help to treat bowel problems?

You might have heard that probiotic ('live' or 'bio') yoghurts and drinks can improve your digestive health. At the moment, there is not enough evidence to support their use in bowel problems related to cancer treatment. If you are **neutropenic** (have a low white blood cell count) or you are at risk of developing neutropenia, you might be advised to avoid probiotic products because you have a higher than usual risk of infection. Speak to a member of your medical team for advice.

References

The full list of references for this page is available on our website. Alternatively, email publications@lymphoma-action.org.uk or call 01296 619409 if you would like a copy.

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✓	Evidence-based
✓	Approved by experts
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