

How do you assess opioid-induced constipation (OIC)?

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Hello, my name is Chris Herndon, I am an associate professor with the Southern Illinois University Edwardsville School of Pharmacy. I am often asked, “How do you assess patient’s constipation that are concurrently taking opioid analgesics for either cancer or noncancer persistent pain?” There is a number of different assessment tools that are available to us. I prefer two specific tools in clinical practice. The first is the Bristol Scale, which is actually a number of different descriptions of stool that a patient can actually visualize and refer to, there is a number of different ways to provide this to the patient. We will actually post posters of the Bristol Scale in the rooms where we see patients, and you can actually get a Bristol Scale coffee mug online for a very nominal price. As far as overall constipation assessment, the one that I prefer is the Constipation Assessment Scale, and the interesting thing about this is it goes into not just specific patterns of stool and defecation, but it also talks about some of the different specific gastrointestinal symptoms that opioids can lead to, such as abdominal distention, bloating, the feeling of not completely evacuating the bowels, things that our patients will frequently complain of that are on opioids that don’t specifically fall under “When was your last BM?”