

Understanding anterior resection syndrome

Cancer Services

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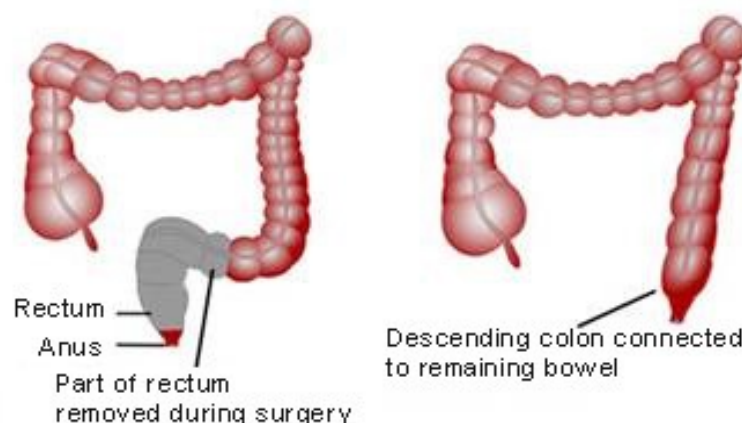
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Information for Patients

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Anterior resection syndrome is a collection of symptoms you may have after removal of part of, or the entire, rectum (see diagram below).

The rectum is the part of the large bowel that stores your stool until you are ready to pass it. It has nerves and muscles which help you to hold onto the stool until you are ready to open your bowels. After your operation, these nerves and muscles may be less sensitive and weaker and you may not be able to hold your stool as you were before. It can take up to two years for your bowel to settle and be working at its best.



This information booklet is produced in partnership with SecuriCare (Medical) Limited

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To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

What are the symptoms of anterior resection syndrome?

Some of the main symptoms are:

- Difficulty in opening and emptying your bowels.
- Urgency - needing to open your bowels urgently.
- Leakage or lack of control.
- Frequency - numerous bowel movements over a few hours.
- Erratic bowel habit - not passing a stool for a day or two and then having numerous bowel movements another day.
- Increased wind.
- Incomplete evacuation-not emptying your bowels completely.

What advice can you give me?

We advise you to use appropriate positioning on the toilet.

Sitting



Sitting on the toilet with your knees at a 90 degree angle (see diagram above) stops your bowels from opening by pinching off your anal canal.

Squatting



Whereas squatting (see diagram above) allows the puborectalis muscle to relax which straightens the passageway making it easier for your bowels to open.

Is there anything else that I can do?

Slowing down the time it takes for stools to pass through the large bowel

- You may need Imodium tablets to stop diarrhoea. Start with one 2mg tablet, increasing to two tablets, four times a day (up to 16 mg a day) as necessary. Ideally you should take them 30 minutes before each meal and at bedtime. It is often better to take a small regular dose (for example, one to two tablets daily) rather than a larger dose now and then.
- You may need to adjust the amount of fibre in your diet. Soluble fibre (found in oats, porridge, bananas pears and apples with the skin removed) helps to slow down bowel movements and helps reduce diarrhoea and soft stools.

Constipation and difficulty passing stool

- Insoluble fibre (found in seeds, bran, golden linseeds, multigrain, wholegrain and wholemeal foods such as bread and cereals) helps reduce constipation and other bowel problems.
- Skipping meals may make stools more watery and increase wind. You should eat at regular times to encourage a regular pattern of opening your bowels.
- You may need to take Fybogel or psyllium seed husks (you can purchase these from health food shops). They can help slow down your bowel movements and make your stool thicker. They can also help prevent constipation by absorbing water and giving your stools more bulk which will make them easier to push out.

Other helpful tips

- If you are experiencing incontinence or urgency, muscle strengthening exercises combined with dietary changes may help your symptoms.
- Chew your food thoroughly.
- Drink at least two litres a day: sip slowly and drink either between meals or at the end of a meal.
- Try having small, frequent meals (five to six each day).
- Keep a food diary. Add new foods one at a time so that you can see the effect it has on your bowel movements.
- Caffeine and alcohol can worsen symptoms.
- Lactose (found in milk and milk products) can worsen diarrhoea. Try lactose-free milk.
- Your doctor may prescribe amitriptyline or smooth muscle relaxants— if so, you will be given further information about these. You may be referred the Bowel Function Team.
- Carry a pack of essentials (wet wipes, barrier cream, Imodium tablets) wherever you go.

Foods that cause wind

Beans, lentils, pulses
Beer
Broccoli
Brussels sprouts
Cabbage
Cauliflower
Cucumber
Dairy products
Eggs
Fizzy drinks
Nuts
Onions
Radishes
Spinach
Sweetcorn

Things that help to reduce wind

Peppermint oil
Live yoghurt
Probiotic drinks
Charcoal tablets

Foods that make stools firmer

Arrowroot biscuits
Apples (no skin)
Apple sauce
Bananas
Cheese
Chicken
Fish
Marshmallows
Oats, porridge
Peanut butter
Pears (no skin)
Potatoes (no skin)
Pretzels
Tapioca
White boiled rice
White pasta
White bread

Foods that cause softer, more frequent stools

Vegetables - red pepper, cabbage, onions, spinach, beans, peas, corn, Brussels sprouts, broccoli
Fruit
Spices - chilli, curry, garlic
Caffeine - coffee, tea, cola, chocolate
Alcohol – beer, red wine
Sorbitol or Mannitol - sugar replacement products
High fibre cereals and breads
Dairy products
Nuts and popcorn

Contact details

If you have any concerns or questions please contact :

Colorectal nurse specialists (key workers):

Leicester Royal Infirmary 0116 258 5184

Leicester General Hospital 0116 258 4455

Further information:

www.bowelcanceruk.org.uk

www.acpgbi.org.uk

www.macmillan.org.uk—produces a booklet “Managing the late effects of bowel cancer treatment”

Contact details:

(All leaflets should include a contact number for patients if they have questions)

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Previous reference:

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