

Chronic Constipation Icd 10

A wide range of treatments are used for chronic pain; drug therapy including opioid and non-opioid drugs, cognitive behavioral therapy and physical therapy are the most common interventions. Medications such as aspirin and ibuprofen are used for mild pain whereas morphine and codeine are prescribed for severe pain. Non-pharmacological treatments...
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Anismus is a common finding in healthy people as well as in people with chronic constipation and fecal incontinence, and it represents a non-specific finding Anismus or dyssynergic defecation is the failure of normal relaxation of pelvic floor muscles during attempted defecation. It can occur in both children and adults, and in both men and women (although it is more common in women). It can be caused by physical defects or it can occur for other reasons or unknown reasons. Anismus that has a behavioral cause could be viewed as having similarities with parcopresis, or psychogenic fecal retention
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Constipation has many causes. Common causes include slow movement of stool within the colon, irritable bowel syndrome, and pelvic floor disorders. Underlying associated diseases include hypothyroidism, diabetes, Parkinson's disease, celiac disease, non-celiac gluten sensitivity, vitamin B12 deficiency, colon cancer, diverticulitis, and inflammatory bowel disease.

Medications associated with constipation include opioids, certain antacids, calcium channel blockers, and anticholinergics. Of those taking opioids about 90% develop constipation. Constipation is more concerning when there is weight loss or anemia, blood is present in the stool, there is a... 50401a9f1f The most common types of chronic pain include back pain, severe headache, migraine, and facial pain. Chronic pain can lead to severe psychological and physical effects that may persist for a lifetime. Physical complications can include damage to brain neurons (grey matter loss), insomnia and sleep deprivation, metabolic disorders, chronic stress, obesity, and heart attack. Mental health consequences may include depression and neurocognitive disorders. 50401a9f1f The diagnosis of CIPO is made based on clinical symptoms and radiographic studies. Abdominal X-rays, CT scans, endoscopies, laboratory tests, and biopsies may be used to make the diagnosis of CIPO. Treatment involves ensuring adequate nutrition and managing the symptoms of CIPO. Enteral or parenteral nutrition may be needed to maintain proper nutrition. Analgesics, antiemetics, antisecretory, antispasmodics, prokinetic agents, laxatives, or antidiarrheal medications may be used to help manage the symptoms of CIPO. The long-term prognosis for... 50401a9f1f Anismus is usually treated with dietary adjustments, such as dietary fiber supplementation. It can also be treated with a type of biofeedback... 50401a9f1f (In)voluntary soiling of undergarments. Encopresis may be classified as retentive (associated with constipation and overflow incontinence) or non-retentive (without constipation and overflow incontinence). Those with constipation may experience

decreased appetite, abdominal pain, have pain on defecation, have fewer bowel movements, and have abnormally hard or soft stools. Those without constipation do not have these symptoms. 50401a9f1f Chronic intestinal pseudo-obstruction can be caused by a variety of other disorders or it can be idiopathic. Certain genetic disorders can also cause CIPO. Mechanisms behind CIPO include abnormalities in the smooth muscle cells, interstitial cells of Cajal (ICCs), and intrinsic and extrinsic neurons. 50401a9f1f Functional constipation is diagnosed using the Rome criteria, a consensus of experts. The criteria include over 25% of defecations involving straining, 25% resulting in lumpy or hard stools, 25% requiring partial evacuation, 25% experiencing anorectal blockage or obstruction, and 25% using manual techniques... 50401a9f1f Functional constipation requires symptoms to be present at least a fourth of the time. Causes include anismus, descending perineum syndrome, inability to control the external anal sphincter, poor diet, unwillingness to defecate, nervous reactions, and deep psychosomatic disorders. Comorbid symptoms such as headache may also be present, especially in children. 50401a9f1f

Encopresis In psychiatric Encopresis (from Ancient Greek ἐγκόρησις, *enkóprēsis*) is repeated passage of stool in inappropriate places by a child who is developmentally expected to be toilet trained. In psychiatric classification systems such as the DSM-5, encopresis is categorized as an elimination disorder. The term is most commonly used to describe fecal soiling associated with chronic constipation and overflow incontinence, though it may also refer to non-

retentive fecal soiling without constipation. associated with chronic constipation and overflow incontinence, though it may also refer to non-retentive fecal soiling without constipation 50401a9f1f

Functional constipation Functional constipation, also known as chronic idiopathic constipation (CIC), is defined by less than three bowel movements per week, hard stools, severe Functional constipation, also known as chronic idiopathic constipation (CIC), is defined by less than three bowel movements per week, hard stools, severe straining, the sensation of anorectal blockage, the feeling of incomplete evacuation, and the need for manual maneuvers during feces, without organic abnormalities. When there is no such cause, functional constipation is diagnosed. Many illnesses, including endocrine, metabolic, neurological, mental, and gastrointestinal obstructions, can cause constipation as a secondary symptom 50401a9f1f

Symptoms are as follows: 50401a9f1f This term is usually applied to children, and where the symptom is present in adults, it is more commonly known as fecal incontinence (including fecal soiling, fecal leakage or fecal seepage). 50401a9f1f Symptoms include tenesmus (the sensation of incomplete emptying of the rectum after defecation has occurred) and constipation. Retention of stool may result in fecal loading (retention of a mass of stool of any consistency) or fecal impaction (retention of a mass of hard stool). This mass may stretch the walls of the rectum and colon, causing megarectum and/or megacolon, respectively. Liquid stool may

leak around a fecal impaction, possibly causing degrees of liquid fecal incontinence. This is usually termed encopresis or soiling in children, and fecal leakage, soiling or liquid fecal incontinence in adults. 50401a9f1f == Signs and symptoms == 50401a9f1f == Signs and symptoms == 50401a9f1f

List of hepato-biliary diseases metabolic diseases (chapter E in ICD-10) haemochromatosis Wilson's disease Gilbert's syndrome Crigler-Najjar syndrome Hepato-biliary diseases include liver diseases and biliary diseases. Rarely, cirrhosis is congenital. cirrhosis. Their study is known as hepatology 50401a9f1f

== Definitions and terminology == 50401a9f1f

Chronic pain This type of pain contrasts with acute pain, which is associated with a specific cause, typically resolves when the cause is treated, and decreases over time. It is described Chronic pain is pain that persists or recurs for longer than 3 months. Medical Association, the costs related to chronic pain in the US are about US\$560-635b. It is also described as burning, electrical, throbbing, or nauseating pain. In ICD-11 chronic pain is classified under MG30. Chronic pain can last for years. Persistent pain often serves no apparent useful purpose 50401a9f1f

Obstructed defecation Obstructed defecation is one of the causes of chronic constipation Obstructed defecation syndrome (abbreviated as ODS, with many synonymous terms) is a major cause of functional constipation (primary constipation), of which it is considered a subtype. Normal

definitions of functional constipation include infrequent bowel movements and hard stools. constipation (colonic dysmotility) and irritable bowel syndrome with constipation. It is characterized by difficult and/or incomplete emptying of the rectum with or without reduction in the frequency of bowel movements. In contrast, ODS may occur with frequent bowel movements and even with soft stools, and the colonic transit time may be normal (unlike slow transit constipation), but delayed in the rectum and sigmoid colon 50401a9f1f

Symptoms of a fecal impaction include the following:
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Constipation sensitivity may also present with constipation. Other symptoms may include abdominal pain, bloating, and feeling as if one has not completely passed the bowel movement. The stool is often hard and dry. The normal frequency of bowel movements in adults is between three per day and three per week. Babies often have three to four bowel movements per day while young children typically have two to three per day. Cystocele can develop as a result of chronic constipation. Complications from constipation may include hemorrhoids, anal fissure or fecal impaction. Constipation can be caused or exacerbated by Constipation is a bowel dysfunction that makes bowel movements infrequent or hard to pass 50401a9f1f

== Signs and symptoms == 50401a9f1f

Chronic pancreatitis It can present as episodes Chronic pancreatitis is a long-standing inflammation of the pancreas

that alters the organ's normal structure and functions. Chronic pancreatitis is a risk factor for the development of pancreatic cancer. It is a disease process characterized by irreversible damage to the pancreas as distinct from reversible changes in acute pancreatitis. Chronic pancreatitis is a long-standing inflammation of the pancreas that alters the organ's normal structure and functions. Tobacco smoke and alcohol misuse are two of the most frequently implicated causes, and the two risk factors are thought to have a synergistic effect with regard to the development of chronic pancreatitis. It can present as episodes of acute inflammation in a previously injured pancreas, or as chronic damage with persistent pain or malabsorption 50401a9f1f

Fecal impaction immobile bulk of feces that can develop in the rectum as a result of chronic constipation (a related term is fecal loading, which refers to a large volume A fecal impaction or an impacted bowel is a solid, immobile bulk of feces that can develop in the rectum as a result of chronic constipation (a related term is fecal loading, which refers to a large volume of stool in the rectum of any consistency). It is estimated that 50% of elderly patients in geriatric wards and nursing homes suffer from fecal impaction in the course of a year. Treatment includes laxatives, enemas, and pulsed irrigation evacuation (PIE) as well as digital removal. It is not a condition that resolves without direct treatment. Commonly affected populations include the elderly and chronically ill, especially those with neuropsychiatric diseases. Fecal impaction is a common result of neurogenic bowel dysfunction and causes immense discomfort and pain 50401a9f1f

== Liver diseases == 50401a9f1f

Chronic intestinal pseudo-obstruction Chronic intestinal pseudo-obstruction Chronic intestinal pseudo-obstruction (CIPO) is a very rare syndrome with chronic and recurrent symptoms that suggest intestinal obstruction in the absence of any mechanical blockage of the lumen. The most common symptoms of CIPO include abdominal pain, constipation, nausea, vomiting, dysphagia, and abdominal distention. include abdominal pain, constipation, nausea, vomiting, dysphagia, and abdominal distention. CIPO can lead to malnutrition. CIPO can lead to malnutrition 50401a9f1f

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