HEALTH BASICS

# Laxatives

Laxatives are medicines that make stool easier to pass or help the bowel move.

**WHAT IT IS**
Medicines that help you pass stool

**WHERE IT COMES UP**
Constipation treatment, bowel preparation, and some medicine plans

**WHY IT MATTERS**
Relieves constipation but can cause harm if misused

**WHAT IT IS NOT**
Not a disease or diagnosis

**WHO TO ASK**
Pharmacist, primary care clinician, or gastroenterology service

**HOW IT IS CHECKED**
Bowel history, medicine review, and examination when needed

## Overview

Laxatives are medicines used mainly to treat constipation. Constipation can mean passing stool less often than usual, having hard or dry stool, straining, or feeling that you have not emptied your bowel.

Different laxatives work in different ways. Some add bulk or water to stool. Others stimulate the bowel muscles or act directly in the rectum. They come as powders, liquids, tablets, capsules, suppositories, and enemas.

A laxative may also be part of a bowel preparation before a colonoscopy or operation. Bowel preparations use specific products and instructions. They are not interchangeable with an ordinary constipation treatment.

Occasional constipation may improve with fluids, movement, and enough fibre, although these steps are not suitable or sufficient for everyone. Constipation caused by medicines, a medical condition, or a stool blockage may need a more specific plan.

Laxatives are not a disease or diagnosis. Needing one does not explain why constipation is happening.

## How it works

The active ingredient tells you what type of laxative you are taking. Brand names can contain different ingredients, so check the package rather than relying on the name alone.

Bulk-forming laxatives absorb liquid and increase the size and softness of stool. Examples include psyllium and methylcellulose. They usually need to be taken with enough fluid to avoid making constipation worse.

Osmotic laxatives draw or hold water in the bowel. This softens stool and may increase bowel movements. Examples include polyethylene glycol, also called macrogol, and lactulose. Magnesium salts and sodium phosphate products also act osmotically but have additional safety concerns for some people.

Stimulant like methylphenidate or lisdexamfetamine laxatives increase bowel muscle activity and fluid movement. Examples include bisacodyl and senna. Cramping or urgency can occur.

Stool softeners help water and fats mix with stool. Docusate is a common example. Evidence for how well stool softeners work differs by situation, so another option may sometimes be preferred.

Rectal treatments include suppositories and enemas. They act in the lower bowel and may work sooner than oral products. They are not appropriate for every cause of constipation.

How quickly a laxative works depends on its ingredient and how it is taken. Follow the timing information on the label or your prescribed plan. Taking extra because a product has not worked immediately can cause harm.

## Why it matters for your health

The right laxative can reduce straining and make stool easier to pass. This may be useful for occasional constipation or as part of treatment for long-term constipation.

Choice matters because constipation has many possible causes. Low fibre intake, reduced activity, pregnancy, changes in routine, and dehydration can contribute. Medicines such as opioids like oxycodone or morphine , some antacids, iron supplements, and certain medicines for mood, allergies, or blood pressure may also slow the bowel.

Some people need a planned, longer course of treatment. This can include people taking opioids or those with long-term bowel problems. Regular use under a clinician's plan is different from repeatedly increasing an over-the-counter product without review.

Laxatives do not produce meaningful loss of body fat. Misusing them for weight control mainly causes loss of water and stool and can lead to dehydration or changes in body salts.

Children, pregnant people, older adults, and people with kidney, heart, or bowel conditions may need help choosing a product. The same applies if you take several medicines, because some laxatives can affect medicine absorption or fluid and salt balance.

## What can go wrong

Common unwanted effects include gas, bloating, abdominal cramps, loose stool, and urgency. These often relate to the type or amount of laxative used.

Diarrhoea can cause dehydration. Significant fluid loss may also disturb electrolytes, the minerals needed for nerves, muscles, and the heart to work normally. The risk can be higher with excessive use, some bowel preparations, or certain sodium phosphate and magnesium products.

A faecal impaction is a mass of hard stool stuck in the rectum or colon. Watery stool can sometimes leak around it and look like diarrhoea. An impaction may need an examination and specific treatment rather than repeated self-treatment.

A bowel obstruction is a blockage that stops stool and gas moving through the intestine. Laxatives may be unsafe if a blockage is suspected.

Seek urgent medical assessment if constipation occurs with:

Call emergency services for severe pain with collapse, fainting, confusion, breathing difficulty, or heavy bleeding. If someone has taken much more laxative than directed, contact a poison information service or emergency service promptly.

Arrange routine follow-up if constipation continues despite appropriate self-care, keeps returning, or requires frequent laxative use. A new and lasting change in bowel habits also deserves review, especially when there is no clear explanation.

- Persistent or severe abdominal pain
- Repeated vomiting or a noticeably swollen abdomen
- Inability to pass both stool and gas
- Fever, unexplained weight loss, or new rectal bleeding
- Black, tar-like stool or more than a small amount of blood

## What you can do

Read the label before taking a laxative. Check the active ingredient, how it should be taken,

how long it may be used, and what to do if it does not work. Do not combine products unless a pharmacist or clinician has confirmed that the ingredients can be used together.

Keep a short record if the problem is recurring. Note:

Ask a pharmacist which type matches your situation and whether it can interact with your medicines. Ask a clinician whether a medicine you take could be contributing to constipation. Do not stop a prescribed medicine without discussing it first.

Before giving a laxative to a child, ask a healthcare professional for product-specific advice. Also ask before self-treating if you are pregnant, have kidney or heart disease, have had bowel surgery, or have been told that you have a narrowing or blockage in the bowel.

There is no single test that shows which laxative everyone should use. Assessment may involve a bowel history, medicine review, abdominal or rectal examination, and selected tests when the history suggests another cause.

- How often you pass stool and whether it is hard, soft, or watery
- Straining, pain, bleeding, or a feeling of incomplete emptying
- Laxative names, active ingredients, and when you took them
- Recent changes in food, fluids, activity, health, or medicines

## Common questions

Can I take a laxative every day?

Some laxatives are used regularly as part of a planned treatment, while others are intended for shorter use. Check the product instructions and seek review if you need ongoing treatment or keep increasing the amount.

Do stimulant laxatives make the bowel "lazy"?

Appropriate use does not automatically mean the bowel has become dependent. However, frequent unsupervised use can cause diarrhoea, cramping, and electrolyte problems. Ongoing need should be reviewed rather than assumed to be addiction.

Can I use two different laxatives together?

Sometimes clinicians use products with different actions together. Do not combine them on your own because ingredients may overlap and increase side effects.

What if the first laxative does not work?

Check how long that ingredient normally takes to act and make sure it was used as directed. Do not keep taking extra doses. A pharmacist can help identify a suitable next step; persistent

constipation needs clinical review.

Are "natural" laxatives safer?

Not necessarily. Senna, for example, comes from a plant but can still cause cramping, diarrhoea, and medicine-related problems. Safety depends on the ingredient, amount, and your health.

Can laxatives help with weight loss?

They do not reduce body fat. Using them for weight control can cause dehydration and electrolyte disturbances. Support is available from primary care or an eating-disorder service if laxative use feels difficult to control.

## Sources

- National Institute of Diabetes and Digestive and Kidney Diseases: Treatment for Constipation
- National Health Service: Laxatives
- American Gastroenterological Association and American College of Gastroenterology: Pharmacological Management of Chronic Idiopathic Constipation
- U.S. Food and Drug Administration: Risk of Serious Harm from Exceeding the Recommended Dose of Over-the-Counter Sodium Phosphate Products
- MedlinePlus: Constipation