

Problems of the Digestive System

Frequently Asked Questions

Overview

What are some common digestive problems?

Common digestive problems include the following:

- Constipation
- Diarrhea
- Acid reflux
- Hemorrhoids

Most common digestive problems are short term and easy to control with lifestyle changes and sometimes medication. If symptoms don't get better, or if they get worse, talk with your health care professional. In some cases, these problems can be a sign of more serious medical conditions.

What are examples of common digestive disorders?

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Common digestive disorders include the following:

- Irritable bowel syndrome (IBS)
- [Inflammatory bowel disease \(IBD\)](#)
- Celiac disease

These disorders affect more women than men. They can last for long periods of time, although symptoms can come and go.

Constipation

What is constipation?

Constipation involves having fewer than three bowel movements a week. Stools may be firm or hard to pass. Your abdomen may feel swollen or bloated.

What causes constipation?

Common causes of constipation include

- not eating enough fiber
- not drinking enough water
- certain medications
- changes in routine (such as travel)

During pregnancy, increased levels of [hormones](#) can slow down the digestive system and cause constipation.

What is fiber and why is it important?

Fiber is found in plant foods. It's the part of the plant that your body cannot digest. Fiber passes relatively unchanged through your digestive system. It can help prevent constipation by adding bulk to the stool, making it easier to pass. A fiber-rich diet may also help lower [cholesterol](#) levels and help you maintain a healthy weight.

Current guidelines recommend that women eat 25 grams of fiber per day. Most Americans only get about 15 grams per day.

What are high-fiber foods?

Good sources of fiber include fruits, vegetables, beans, whole grains, and bran. Whole grains include steel-cut oatmeal, brown rice, barley, and corn (including popcorn). Bran

is the outer covering of grains such as corn and wheat. It is used as a high-fiber ingredient in cereals and other foods.

How can constipation be treated?

If constipation continues, your health care professional may suggest a [laxative](#). Most of these products are available without a prescription.

How do laxatives work?

Different types of laxatives work in different ways:

- Bulk-forming laxatives absorb water and expand, which increases moisture in the stool and makes it easier to pass (these are thought to be the safest laxatives).
- Stool softeners add liquid content to the stool to soften it.
- Stimulants use a chemical to increase bowel activity, which moves the stool through the intestines.

Laxatives, especially stimulants, should be used with caution. You should stop using these products once your bowel movements become regular again. Overuse of stimulants can cause your bowels to depend on them.

How can constipation be prevented?

You can help prevent constipation by

- drinking plenty of water
- eating at least 25 grams of fiber a day
- exercising
- not holding your stool (using the bathroom when you feel the urge to have a bowel movement)

Diarrhea

What is diarrhea?

Diarrhea is having three or more loose bowel movements a day. It can also cause cramping.

What causes diarrhea?

Several things can cause diarrhea:

- Infection with harmful bacteria or viruses, which can be caused by eating or drinking contaminated food or water
- Consuming dairy products (if you are [lactose intolerant](#)), caffeine, artificial sweeteners, or certain additives
- Taking medications, especially antibiotics
- Digestive diseases, such as [irritable bowel syndrome \(IBS\)](#)

What should I do if I have diarrhea?

Diarrhea can cause [dehydration](#) (loss of fluids from the body). If you have diarrhea, drink plenty of fluids to replace those that are lost.

If diarrhea does not go away in a few hours, drink fluids and liquid foods that contain salt, such as sports drinks or broth. Avoid drinking dairy products, soda, and juices. They may contain lactose, caffeine, or sugar, which may make diarrhea worse.

Over-the-counter anti-diarrheal medications can be helpful. But they should not be taken if you have a high fever or bloody diarrhea, which can be signs of a bacterial infection.

When do I need to see my health care professional about diarrhea?

If diarrhea lasts more than 2 days, see your health care professional. Also see your health care professional if

- your stools contain blood or pus
- you have a fever
- you have severe abdominal pain
- you have signs of dehydration (thirst, dry skin, fatigue, dizziness, less frequent urination, or dark-colored urine)

You may need tests to find the cause of your diarrhea so that the right treatment can be given.

What should I know about diarrhea and birth control pills?

If you use birth control pills, diarrhea or vomiting may decrease their effectiveness. Talk with your health care professional about what to do if you have vomiting or diarrhea that lasts for 48 hours or more after taking a combined birth control pill or that lasts for 3 hours or more after taking a progestin-only pill.

Acid reflux

What is acid reflux?

Acid reflux happens when the muscle in your [esophagus](#) that opens and closes when you swallow does not work properly. When this happens, food and digestive fluids, which contain acid, back up into your esophagus. Acid reflux can cause a burning feeling in your chest and throat, which is sometimes called heartburn.

Acid reflux is common and usually is not serious.

When does acid reflux happen most often?

You may notice acid reflux more often when you drink alcohol or caffeine or eat certain foods, such as citrus fruits, tomatoes, or fried foods. It may become more frequent while lying down. It happens more often during pregnancy as well as in people who are obese or who smoke.

How can I control or prevent acid reflux?

Try taking these steps:

- Raise the head of your bed.
- Eat small, more frequent meals.
- Quit smoking.
- Avoid foods and drinks that make your symptoms worse.

- Avoid lying on your back right after eating.

How can acid reflux be treated?

Several over-the-counter medications are available that may help reduce your symptoms. Antacids reduce the acid content in the stomach. Other medications stop the digestive system from making too much acid. Some of these medications are available over the counter.

What if I have acid reflux more than twice a week?

If acid reflux happens more than twice a week, or if you have been taking over-the-counter medications for more than 2 weeks with no relief, you may have a condition called gastroesophageal reflux disease (GERD). Treatment includes lifestyle changes and medication. Surgery can be used to treat GERD in some cases.

GERD that is not treated can lead to [complications](#), including ulcers in the esophagus, narrowing of the esophagus, and a precancerous condition called Barrett's esophagus. If you have GERD, it is important to see your health care professional regularly for treatment and follow-up.

Hemorrhoids

What are hemorrhoids?

Hemorrhoids are swollen blood vessels in and around the [anus](#) and lower [rectum](#). The vessels stretch under pressure. They can become painful, itchy, and irritated. Passing stool may injure the hemorrhoids and cause them to bleed.

What causes hemorrhoids?

Hemorrhoids can result from several factors:

- Being overweight
- Pregnancy
- Standing or sitting for long periods
Straining during physical labor

- Constipation (straining to have bowel movements)

Adding fiber and fluids to your diet can help prevent hemorrhoids.

Can hemorrhoids be treated?

The symptoms of hemorrhoids can be relieved with ice packs to reduce swelling. Sitting in a bath of warm water may relieve symptoms. You may also use a hemorrhoid cream or suppositories. If problems do not go away, contact your health care professional. Surgery may be needed to remove hemorrhoids in some cases.

Irritable Bowel Syndrome

What is irritable bowel syndrome?

IBS mainly affects women between the ages of 30 and 50. For some people, it is only mildly annoying. For others, it can be serious. Symptoms may include the following:

- Cramps
- Gas
- Bloating
- Changes in bowel habits—constipation, diarrhea, or both
- An urge to have a bowel movement that does not happen
- Stools that have mucus in them

What causes irritable bowel syndrome?

It is not clear what causes IBS. But stress, eating large meals, or travel may trigger the symptoms. Certain medications or foods can also cause symptoms to flare up. Caffeine, dairy products, and large amounts of alcohol can cause problems as well. Women may have more symptoms during their [menstrual periods](#).

How is irritable bowel syndrome treated?

IBS cannot be cured, but it can be managed to reduce the symptoms. You may have tests to help rule out other conditions first.

Your health care professional or a nutritionist can suggest changes in your diet to help manage IBS. Eating frequent small meals rather than two or three large meals a day can help. In some cases, adding fiber to your diet may help. Your health care professional may also suggest medications to relieve the symptoms.

Inflammatory Bowel Disease

What is inflammatory bowel disease?

IBD is a group of diseases that cause [inflammation](#) throughout the digestive system. If inflammation does not go away, parts of the digestive system can be damaged. There are two main types of IBD:

- Crohn's disease can affect any part of the digestive system
- Ulcerative colitis usually affects the large intestine (also called the colon)

Symptoms of IBD may include the following:

- Abdominal pain
- Diarrhea that doesn't go away
- Fatigue
- Stools that have blood in them
- Weight loss

What causes inflammatory bowel disease?

It's not clear what causes IBD, but it may be related to a problem with the [immune system](#). Your [genes](#) may be a factor too. Your health care professional may do several tests to make sure that your symptoms are caused by IBD and not caused by an infection.

How is inflammatory bowel disease treated?

IBD is usually treated with medication first. But if the damage is severe, surgery may be

an option.

Celiac Disease

What is celiac disease?

People with celiac disease cannot tolerate gluten, a protein found naturally in wheat, rye, and barley. Gluten is also added to certain food products.

When gluten is eaten, the **immune system** reacts by damaging the lining of the small intestine. Because of this damage, **nutrients** cannot be absorbed properly.

Celiac disease is one of the most common digestive disorders, affecting about 1 in 133 people.

What are the symptoms of celiac disease?

Some people with celiac disease have no symptoms. Others may have

- diarrhea
- constipation
- fatigue
- abdominal pain and bloating

How is celiac disease diagnosed?

If your health care professional thinks that you may have celiac disease, the first step is to have a blood test. This test looks for certain **antibodies** that show that the immune system is reacting against gluten. If the antibodies are found in your blood, you may have a **biopsy** of the intestine to look for damage and confirm the diagnosis.

How is celiac disease treated?

If celiac disease is not treated, the disease can increase the risk of serious health problems, including **osteoporosis**, **anemia**, and cancer. Treatment involves avoiding

gluten in your diet. Researchers are also studying medications that can make gluten less toxic to the small intestine.

Colorectal cancer

What is colorectal cancer?

Colorectal cancer is cancer of the rectum and colon. It is the second leading cause of cancer death among women in the United States. In most cases, colorectal cancer develops slowly over time. It often begins as a **polyp** —a tissue growth in the colon or rectum.

Routine screening can help prevent colon cancer. Polyps that are found during routine screening can be removed easily before they become cancerous.

How can I know if I am at high risk of colon cancer?

You are at high risk of colon cancer if you

- have a first-degree relative (a parent or sibling) younger than 60 with colorectal cancer or colon polyps
- have two or more first-degree relatives of any age with colorectal cancer or colon polyps
- have had colorectal cancer
- have had colon polyps
- have a family history of familial adenomatous polyposis or hereditary nonpolyposis colon cancer

Lifestyle can play a role in your risk of colorectal cancer. The following factors can increase your risk:

- Eating a diet that is low in fiber and high in fat
- Not exercising regularly
- Being overweight

- Smoking cigarettes or drinking large amounts of alcohol

When and how should I be screened for colon cancer?

If you are at average risk of colon cancer, the preferred screening method is a [colonoscopy](#) done every 10 years beginning at age 45.

Screening with colonoscopy for people at high risk should begin at age 40, or 10 years younger than the age when the youngest affected relative received the diagnosis.

It is recommended that you stop having colonoscopy screening if you are older than 75.

Are there other methods for colon cancer screening?

Other screening methods include the following:

- [Fecal occult blood test](#) or fecal immunochemical test every year—For this test, several stool samples are collected at home and are sent to a lab. The samples are checked for blood, which could be a sign of cancer of the colon or rectum.
- Fecal [DNA](#) test every 1 to 3 years—DNA is the substance that makes up genes. Colon cancer cells contain abnormal DNA that can be detected with a special test.
- Flexible [sigmoidoscopy](#) every 5 years—This test involves placing a thin device into the rectum and lower colon to look for cancer.
- [Computed tomography \(CT\)](#) every 5 years—Sometimes called a "virtual colonoscopy," this imaging test allows the colon to be viewed without a colonoscope.

The type of screening test that you have is based on its risks, benefits, availability, and your preference. If you choose to have one of the other screening tests and you have an abnormal result, a follow-up colonoscopy is usually done.

What are the symptoms of colorectal cancer?

Colorectal cancer usually shows no signs in the early stages of the disease. In the more advanced stages, signs and symptoms may include the following:

- A change in bowel habits

- Bleeding from the rectum
- Blood in the stool
- Stools that are more narrow than usual
- Abdominal discomfort (bloating, cramps, or frequent gas pains)
- A feeling that you need to have a bowel movement (that does not go away after a bowel movement)
- Loss of appetite
- Weakness and feeling tired

Having these symptoms does not mean that you have cancer. The same symptoms can be caused by other digestive disorders. Talk with your health care professional if you have any of these symptoms.

How is colorectal cancer treated?

If your health care professional determines that you have colorectal cancer, there are several treatments available, including surgery, [radiation therapy](#), [chemotherapy](#), and more. Learn about cancer treatment by visiting the websites in the Resources section below.

Resources and Glossary

Resources

American Cancer Society

www.cancer.org/cancer/colon-rectal-cancer.html

Information about colorectal cancer causes, prevention, diagnosis, and treatment.

Colon Cancer Foundation

<https://coloncancerfoundation.org/treatment>

More information about treatment options for colorectal cancer.

National Institute of Diabetes and Digestive and Kidney Diseases

www.niddk.nih.gov/health-information/digestive-diseases

Information about many digestive disorders, including IBS, Crohn's disease, celiac disease, diarrhea, and acid reflux.

Glossary

Anemia: Abnormally low levels of red blood cells in the bloodstream. Most cases are caused by iron deficiency (lack of iron).

Antibodies: Proteins in the blood that the body makes in reaction to foreign substances, such as bacteria and viruses.

Anus: The opening of the digestive tract through which bowel movements leave the body.

Biopsy: A minor surgical procedure to remove a small piece of tissue. This tissue is examined under a microscope in a laboratory.

Chemotherapy: Treatment of cancer with drugs.

Cholesterol: A natural substance that is a building block for cells and hormones. This substance helps carry fat through the blood vessels for use or storage in other parts of the body.

Colonoscopy: An exam of the large intestine using a small, lighted instrument.

Complications: Diseases or conditions that happen as a result of another disease or condition. An example is pneumonia that occurs as a result of the flu. A complication also can occur as a result of a condition, such as pregnancy. An example of a pregnancy complication is preterm labor.

Computed Tomography (CT): A type of X-ray that shows internal organs and structures in cross section.

Dehydration: A condition that happens when the body does not have as much water as it needs.

DNA: The genetic material that is passed down from parent to child. DNA is packaged in structures called chromosomes.

Esophagus: The tube that connects the mouth with the stomach.

Fecal Occult Blood Test: A test in which a sample of stool is tested for blood, which could be a sign of cancer of the colon or rectum.

Gene: Segments of DNA that contain instructions for the development of a person's physical traits and control of the processes in the body. The gene is the basic unit of heredity and can be passed from parent to child.

Hormones: Substances made in the body that control the function of cells or organs.

Immune System: The body's natural defense system against viruses and bacteria that cause disease.

Inflammation: Pain, swelling, redness, and irritation of tissues in the body.

Inflammatory Bowel Disease (IBD): The name for a group of diseases that cause inflammation of the intestines. Examples include Crohn's disease and ulcerative colitis.

Irritable Bowel Syndrome (IBS): A digestive disorder that can cause gas, diarrhea, constipation, and belly pain.

Lactose Intolerant: Being unable to digest lactose, a sugar found in many dairy products.

Laxative: A product that is used to help empty the bowels.

Menstrual Periods: The monthly shedding of blood and tissue from the uterus.

Nutrients: Nourishing substances found in food, such as vitamins and minerals.

Osteoporosis: A condition of thin bones that could allow them to break more easily.

Polyp: An abnormal tissue growth that can develop on the inside of an organ.

Radiation Therapy: Treatment with radiation.

Rectum: The last part of the digestive tract.

Sigmoidoscopy: A test in which a slender device is placed into the rectum and lower colon to look for cancer.

If you have further questions, contact your ob-gyn.

Don't have an ob-gyn? [Learn how to find a doctor near you.](#)

FAQ120

Last updated: August 2022

Last reviewed: November 2023

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