

Monthly Newsletter for Woodlands' CCM Program



What to do to get things moving again

By Mark M. Ryan MD

For most adults, a consistent bowel routine is almost as elusive as a consistent sleep routine. It is normal to have variations in bowel movement patterns ranging from three times a day to once every three days. Chronic constipation is defined by having fewer than three bowel movements a week for more than three months in a row. While chronic constipation is a common and concerning symptom; however, it is seldom indicative of an underlying disease.

While the main causes of constipation are lack of fiber and water in diet and lack of exercise, medications and medical conditions play a bigger role in causing constipation in adults above the age of 65. Some adults will take medication to prevent loose stools or diarrhea and then precipitate a long period of constipation. Other common medications that can cause constipation are:

- Metoprolol or amlodipine for blood pressure
- Ozempic, Mounjaro, or Trulicity for diabetes
- Calcium or iron supplements
- Allegra, Zyrtec, Claritin or Benadryl for allergies
- Tramadol, hydrocodone, or oxycodone for chronic pain

Around [5% of the population has a “redundant colon”](#), which is being born with an unusually long large bowel that forms extra loops, tortuosities, and potentially kinks causing a bowel obstruction. This condition is diagnosed during a routine colonoscopy or barium enema study. Other medical conditions that commonly cause constipation are diabetes, hypothyroidism, stroke, Parkinson’s disease, and prior abdominal or pelvic surgery resulting in weakened muscles.

Constipation usually responds well to changes in lifestyle. Ensure your diet has at least 30 grams of fiber per day (more than five servings of whole vegetables or fruit, whole grains, nuts, and seeds) and enough water intake to produce clear urine. Avoid caffeine and alcohol because they cause dehydration, which can make constipation worse. Similarly, start or increase a strength training routine that focuses on your core (read: low back and abdominal muscles) and legs. Add at least 20 minutes a day of dynamic aerobic exercise like walking, dancing, rowing, swimming, or cycling. If diet and exercise do not work, it may be time to talk with your doctor about the need for additional testing or a change in medication to get you moving regularly.

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>>> IN THE NEWS

Intermittent fasting versus medication for blood sugar control - which is better

In this [randomized clinical trial](#) of 405 adults, an intermittent fasting diet achieved better blood sugar control at 16 weeks compared to metformin or empagliflozin (Jardiance).

The diagnosis of diabetes carries a heavy weight for adults, and very frequently leads to medication being immediately prescribed. Researchers in the Chinese Academy of Medical Sciences investigated the effect of a prescribed dietary intervention versus two commonly prescribed diabetes medications, metformin and Jardiance.

405 adults who were newly diagnosed with type two diabetes, not taking any anti-diabetic medications, and had an initial A1C level between 7-9% were randomized to receive metformin 500mg-1,000mg twice daily, Jardiance 10mg daily, or a 5:2 intermittent fasting dietary plan. The intermittent fasting plan consisted of two non-consecutive days within a week (such as Monday and Thursday, or Tuesday and Friday) in which participants consumed a meal replacement instead of all three regular meals resulting in a total energy intake of only 500 Calories during these days. During the remaining five days of the week, participants chose their own breakfast and lunch but consumed only a meal replacement for dinner.

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From baseline to 16 weeks, participants in the 5:2 intermittent fasting group had an average A1C reduction of 1.9%, which was significantly better than those receiving metformin (-1.6%) and Jardiance (-1.5%). At week 16, the average weight loss in the 5:2 intermittent fasting group was 21 pounds, which was significantly greater than the metformin group (12 pounds) and Jardiance (12.7 pounds).

This is another piece of good news for advocates of lifestyle intervention as the initial approach to treating diabetes, and it gives a specific and simple “prescription” of which diet to follow. Limitations of this study that deserve consideration are its very short duration and decision to only include patients whose initial A1C was <9%. Patients whose A1C at time of diagnosis is above 9% likely require medication to stabilize them while a dietary approach is instituted, and it is not known if the effects of the 5:2 intermittent fasting diet approach remain superior to metformin or Jardiance after three months or not.



>>> THIS MONTH

July is hot! Stay hydrated

Boost Your Summer Hydration with Water-Rich Foods

Staying hydrated during the summer does not just mean drinking more water. An average serving of cucumber has 4 ounces of water, and a large orange can have up to 6 ounces of water. In addition to drinking water, make sure to eat at least five servings of whole vegetables or fruits every day to stay hydrated during the summer.

- **Watermelon:** Contains about 92% water. Provides essential vitamins such as A, B6, and C.
- **Strawberries:** Contains about 91% water. Rich in fiber, vitamins, and antioxidants.
- **Celery:** Contains about 95% water. Low in calories and high in fiber. Contains vitamins A, C, and K.
- **Lettuce:** Contains about 95% water. Rich in vitamins A and K, and provides folate.

Call Us First 

Summer cold and not sure if you can wait until Monday?

Our physicians are on-call 24/7 and available to assess your symptoms and treat you when you need treatment. Please call us before going to the emergency room so we can advise you on the best course of action. We want you to receive the best care in the most appropriate setting.

Call 850-696-4000 and ask the operator for the Woodlands primary care physician on-call if you are concerned about symptoms worsening before the office opens.

