

MEDICAL ALERT

Constipation in Individuals with Prader-Willi Syndrome

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Constipation is a common problem in individuals with Prader-Willi syndrome (PWS). It takes longer for food to move through the GI system in Prader-Willi syndrome.* This slower passage of food can lead to serious issues similar to the ones seen related to the stomach (see MEDICAL ALERT BOOKLET UNDER SEVERE GASTRIC DISTRESS and GASTROPARESIS). Outpatient methods used to clear constipation in non-PWS patients may be ineffective due to poor fluid intake and hypotonia. Inpatient regimens frequently use large volumes of fluid which may cause problems. Reliance on these methods may lead to life-threatening conditions such as necrosis and perforation of the colon and subsequent sepsis. Due to decreased muscle tone and altered pain response, individuals with PWS may not have the same clinical exam that a non PWS patient would have. A heavier reliance on imaging may be necessary. Individuals with PWS may be at higher risk for impaction. Rectal examination and enema may be required in addition to oral cleanout regimen. This may also be problematic in some leading to rectal picking.

Patients with PWS having constipation and receiving repeated regimens of oral PEG (polyethylene glycol) solutions for bowel cleansing should be monitored closely for abdominal distention and retention. **Failure of standard constipation protocols to clear the stool in a timely manner, especially in the face of increasing abdominal distension, vomiting, decreased appetite, stoppage of food consumption and/or abdominal pain warrants surgical or GI consultation. Emergent surgical or colonoscopic intervention may be necessary.**

*Kuhlmann, et al. (2014) [A descriptive study of colorectal function in adults with Prader-Willi Syndrome: high prevalence of constipation.](#) BMC Gastroenterology, Apr 4; Vol 14: page 63