Foot Reflexology and Constipation

According to Taber’s Cyclopedic Medical Dictionary, constipation is “a decrease in a person’s normal frequency of defecation accompanied by difficult or incomplete passage of stool and/or passage of excessively hard, dry stool.” The Medical Dictionary further states that “normal bowel frequency varies from person to person,” with some having three bowel movements daily and others having one or two bowel movements per week. Constipation has various causes, including a diet lacking in fiber, inadequate consumption of fluids, a sedentary lifestyle, advancing age, many prescription drugs, various illnesses, and obstructions of the bowel. Treatment for constipation includes a diet with fresh vegetables, fruits, and whole grains, medications such as bulk-forming laxatives, and enemas (Taber 552).

I only found one study focused on adults using Reflexology as an intervention for constipation, as well as for anxiety, in which 94% of the participants reported their constipation to have improved “to some extent.” The study focused on women in the UK and tracked the subjects’ colonic transit times in order to determine the effect of reflexology on constipation. For my study, I chose to track the number of bowel movements weekly and the type of stools on the Bristol Stool Chart, which is defined below.

The Subject

My subject is a retired, 85-year-old woman who reports that she sometimes goes 4 or 5 days without having a bowel movement. Her doctor has advised her to take laxatives, which she reports taking not even once a week, but only when she gets “so clogged up that she can’t stand it.” She identifies her bowel movements as starting off at Type 1 then becoming Type 4 on the Bristol Stool Chart. She says that she is not completely emptying her bowel and has to strain to pass the first hard lump. She is taking Metoprolol for heart problems and Citalopram for depression, which she believes may be one of the causes of her constipation. She admits that she does not eat enough vegetables and does not get enough exercise, which she also believes may be a cause.
The Sessions

The subject has had Reflexology before and enjoyed it, but was skeptical that it would work on her constipation. We set up one hour foot reflexology sessions once per week for six weeks on Sundays at 3:45pm and she agreed to keep a daily log tracking the number of bowel movements she had per day, whether or not she had to strain during the bowel movement, and the type of bowel movement on the Bristol Stool Chart. The sessions were performed without music, aromatherapy, foot soaks, or any other interventions. The subject used a pillow under her head and a bolster under her knees for comfort and was offered a blanket.

The Protocol

I began with relaxation techniques on the subject’s right foot, including rubbing and cleaning out the zones and meridians, the compression pull, alternating pulls, and spreading. I then thumb and finger walked the entire surface of the foot—plantar, dorsal, medial and lateral, and returned to the plantar side one more time to focus on the digestive system reflexes. I ended with range of motion exercises and relaxation techniques. Then I repeated the entire protocol on the subject’s left foot.

The Data

Bristol Stool Chart

<table>
<thead>
<tr>
<th>Type 1</th>
<th>separate hard lumps, like nuts, that are hard to pass</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type 2</td>
<td>sausage-shaped but lumpy</td>
</tr>
<tr>
<td>Type 3</td>
<td>sausage-shaped but with cracks on the surface</td>
</tr>
<tr>
<td>Type 4</td>
<td>sausage or snake-like and smooth and soft</td>
</tr>
<tr>
<td>Type 5</td>
<td>soft blobs with clear-cut edges that are easy to pass</td>
</tr>
<tr>
<td>Type 6</td>
<td>fluffy pieces with ragged edges that are mushy</td>
</tr>
<tr>
<td>Type 7</td>
<td>watery with no solid pieces, entirely liquid.</td>
</tr>
</tbody>
</table>

Types 3 and 4 are considered ideal.

Please note that the amount of strain during the subject’s bowel movements was not actually measured on a scale, but on a yes or no basis. I have used a rating of 5 to indicate that there was strain and a rating of 0 to indicate no strain.
Week 1- November 29, 2015- December 5, 2015

Reflexology Session #1, 11/29/15
The only points noticed by the therapist and worked were on the left foot, plantar side in Zone 2 between the shoulder line and waistline, which correspond to the pancreas, stomach, and kidney reflexes. There was no change in the points worked. The subject did not report any sensitive areas, but said she felt “great” after the session.
Week 2—December 6, 2015- December 12, 2015

Reflexology Session #2, 12/6/15
The same points were noticed by the therapist on the left foot plantar in Zone 2 between the diaphragm line and the waistline. The therapist also noticed some congestion on the left foot plantar on the calcaneus at the Sigmoid Flexure reflex. All of these points showed some improvement. The subject did not report any sensitive areas, but said she was sorry the session was over. She was also more talkative during the session.
Week 3—December 13, 2015- December 19, 2015

Reflexology Session #3, 12/13/15
No points were noticed by either the therapist or the subject. The subject noted that there were only two days last week on which she did not have a bowel movement, and expressed surprise that the Reflexology seemed to be helping.

Types of Bowel Movements 12/13/15- 12/19/15

Number of Bowel Movements, Amount of Strain, and Number of Laxatives Taken 12/13/15- 12/19/15
Week 4—December 20, 2015- December 26, 2015

Reflexology Session #4, 12/20/15
No points were felt by either the therapist or the subject. The subject again noted that there were only two days last week that she didn’t have a bowel movement. She reported feeling “wonderful” after the session.
Reflexology Session #5, 12/27/15

No points were noticed by either the therapist or the subject. The subject noted that there had been 3 days last week when she didn't have a bowel movement, and stated the opinion that this must be her normal, regular pattern. She again expressed happiness that the Reflexology sessions seemed to be helping.
Week 6—January 3, 2016- January 9, 2016

Reflexology Session #6, 1/3/16
No points were noticed by either the therapist or the subject. The subject again expressed happiness and relief that the Reflexology sessions were helping, and regret that this was the last one.

![Types of Bowel Movements 1/2/16-1/9/16](chart1.png)

![Number of Bowel Movements, Amount of Strain, and Number of Laxatives Taken 1/3/16-1/9/16](chart2.png)
The Conclusion

In retrospect, it would have been helpful to establish a baseline pattern by asking the subject to track her bowel movements for a week or two before the Reflexology sessions began; however, according to the subject’s verbal report in the interview before the first session, the six weeks of Reflexology did have a significant effect on the subject’s constipation. The data shows that she did not take any laxatives during the six weeks, whereas she did occasionally take them before. She reported a regular pattern of 4 or 5 bowel movements a week for the six weeks, where before she was going 4 or 5 days without having one. While she did still report strain on several of her bowel movements per week during the study, the types of bowel movements on the Bristol Stool Chart show that she had fewer Type 1 bowel movements with hard lumps than she reported she had before the Reflexology sessions started. I spoke with the subject 3 weeks after the study ended, and she reported that she was still having regular bowel movements. While one case study is not enough research to claim that Reflexology will help everyone with constipation, the results show that further study seems warranted.

Resources

