

NR 565 Week 7 Discussion: CPGs Related to Gastrointestinal Conditions

Last Name	Client from Week 7 Lesson
R – T	Lourdes Ayala

Describe your assigned client's situation. Why are they presenting to the clinic? What medications are they currently taking?

Lourdes Ayala, a 47-year-old female, presented to the clinic for a follow-up appointment with symptoms indicative of constipation. She reports frequent difficulty moving her bowels for four months. She stated that her last bowel movement was six days ago and reported that she experienced pain while straining, and the stool was hard and small. During her previous appointment with the NP last month, she stated she increased her fluid intake and took psyllium, polyethylene glycol, and magnesium oxide. Last month, the NP prescribed lactulose; however, after taking the lactulose, there was no significant change in her bowel pattern. Additionally, her medical history indicates depression and previous alcohol addiction, and no allergies were noted. The patient takes paroxetine (Paxil) 25mg PO daily. After the physical examination, all her results were remarkable, leading the NP to consider prescribing another medication to help relieve the patient's constipation.

Assess the applicable clinical practice guideline (CPG) for your assigned client linked on the same page in the lesson where the client's case is located. What treatment is recommended by the CPG for your client's situation?

The applicable clinical practice guidelines for Lourdes's situation include those established by the American Gastroenterological Association (AGA). According to the 2023 guideline, patients with chronic idiopathic constipation should be initially recommended to begin with nonpharmacologic interventions such as lifestyle modification changes like increased exercise, fluid, and fiber; in addition to this intervention, a pharmacology regimen may be needed. The CPGs suggest the practitioner should begin with bulk laxatives such as psyllium to boost fiber intake; on the other hand, if the patient does experience any relief, then osmotic laxatives or stimulant laxatives like polyethylene glycol or magnesium oxide can be prescribed for a short period. The CPGs suggest that if all these laxative treatments do not resolve the patient's constipation, the practitioners should consider prescribing either senna, bisacodyl, or lactulose can be prescribed (Chang et al., 2023). Furthermore, the American Gastroenterological Association recommends that patients who are unresponsive to over-the-counter (OTC) laxative treatments should consider secretagogues such as lubiprostone, linaclotide, plecanatide or the 5-HT₄ agonist prucalopride are considered, especially for patients with irritable bowel syndrome (Chang et al., 2023). In Lourdes's case, none of these nonpharmacologic interventions and over-the-counter (OTC) laxative treatments provided addressed her constipation. The NP should consider further diagnostic tests to determine the reason for chronic idiopathic constipation.

Discuss your personal professional assessment of the client's situation provided in the scenario. What pharmacological treatment is necessary and why?