

## Episode 6 Show Notes

The sad history of Elvis' bowels .....

### **What is poop made of?**

75% water, and the other 25% is a combination of dead bacteria (1/3), indigestible foodstuffs/fiber (1/3) and live bacteria/mucus/cholesterol/inorganic phosphates/proteins (1/3)

What do people call it?

Butt bombs, Lincoln logs, colon cobras. Rob called it doody when he was a kid. Matt called it poos (poo +ooze?)

### **Why is it called "poop" ?**

Originally referred to as "popen", which meant fart. It was presumably the sound made when passing gas.

### **Why does it stink?**

Due to products of the bacteria. Sulfur/nitrogen rich compound, which includes indole, scatole, mercaptans, and hydrogen sulfide gas.

Carnivores have stinkier poops, due to higher degree of sulfides.

### **Why is poop brown?**

Mainly from bilirubin, a product of the breakdown of red blood cells in the liver. More specifically the iron, which is in bilirubin.

(History was stinky... The Thames was nasty... a cesspool. Henry VIII only ever bathed twice !)

### **Other colors of poop**

Black (true black, not really dark brown) often is due to a "high" intestinal bleed... A black poop is called melena. Gastric ulcers, etc.

Bright red can be indicative of a lower intestinal bleed.... Hemorrhoid, anal fissure (like a paper cut) if on the outside of the bowel movement. If the blood is mixed throughout the BM, thinking more of a polyp, or a Meckel's diverticulum.

Multicolor poop. Can be a veritable rainbow, depending on what is consumed (especially with the food colorings of processed foods!)

Green. Freaks parents out. Nothing specifically concerning about this.

**What colors to worry about?** Bright red, pitch black, white.

White: may be having a liver issue. (See above for bright red and pitch black). If temporary, usually nothing.

*Mrs Hufnagel - St. Elsewhere series... check it out !*

### **Lots of constipated kids out there**

High monetary cost. Over a million kids are constipated, and on the rise (Poor diet/processed foods; inactivity? obesity? sleep issues?)

Break.....

## **17:55 Salute to Journalism**

A free press is the bedrock of a free society, in our opinion.

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Back to Poop...

## **24:50 The anatomy of the colon**

2 main functions of colon: 1) to store stool until convenient to defecate 2) to reabsorb water. Also absorbs electrolytes and salvages some nutrients.

Elective colectomies in the late 1800s !!

### **Transit time**

The intestine is a dynamic organ. Transit times vary. In the West, averages 53 hours (processed foods/ low fiber!), whereas in other parts of the world, quicker transit time due to a different diet.

75% of the transit time, on average, is due to time spent in the colon.

### **How often should someone "go"?**

Infants vary from with each feeding, to once a week. All within the realm of normal.

'It's a problem when it's a problem'

### **Causes of constipation ("all over the place")**

Diet (low fiber), Opioids, and others....

### **Infrequent BMs in infants**

Meconium... What if a newborn is not pooping? Getting enough milk? Intestinal atresia? Meconium plug? Lack of anus?

**Hirschsprung Disease.** Lack of some of the nerve cells normally present in the wall of the intestine do not form properly during fetal development. The muscular movements of the colon (peristalsis) are compromised with this. Often, there is a delayed passage of meconium in the newborn (but not always!)

Megacolon can be a consequence of Hirschsprung disease if not detected.

*Mutter Museum in Philadelphia. J.W.'s colon. Huge !!! (go see it with the family?)*

Hirschsprung disease generally diagnosed with a barium enema, and then endoscopy. Then treated with surgery to remove the non-functional segment.

### **Anal stenosis/tight anal ring**

Infants tend to strain a lot. Role of rectal exam, surgery, serial dilation

***Up on next episode... Poopalooza continues.... PLUS, is miraLAX safe?***

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