

Rome IV Criteria Consultation Guide^{1,2}

This page is intended for healthcare professionals only. Do not show to patients.

Thank you for downloading this healthcare professional consultation guide on the Rome IV criteria from the Kyowa Kirin Hub.

Clinicians and patients tend to define constipation differently. To address this issue, an international panel of experts convened to develop the Rome IV criteria for the diagnosis of constipation. This consultation guide will allow you to discuss current constipation symptoms with your patient, in relation to their opioid therapy.

According to the Rome IV criteria, opioid induced constipation (OIC) is present if patients report new, or escalating, of symptoms of constipation when initiating, changing or increasing opioid therapy that must include **2 or more of the following:**

	Yes	No
1. Straining during more than 25% of defaecations	<input type="checkbox"/>	<input type="checkbox"/>
2. Lumpy or hard stools (BSFS 1-2) more than 25% of the time	<input type="checkbox"/>	<input type="checkbox"/>
3. Sensation of incomplete evacuation more than 25% of the time	<input type="checkbox"/>	<input type="checkbox"/>
4. Sensation of anorectal blockage/obstruction in more than 25% of defaecations	<input type="checkbox"/>	<input type="checkbox"/>
5. Manual manoeuvres to facilitate more than 25% of defaecations	<input type="checkbox"/>	<input type="checkbox"/>
6. Fewer than three spontaneous bowel movements per week	<input type="checkbox"/>	<input type="checkbox"/>
In addition, the following criterion must be met:		
7. Loose stools are rarely present without the use of laxatives	<input type="checkbox"/>	<input type="checkbox"/>

References: **1.** Simren M, Palsson O, Whitehead W. Update on Rome IV Criteria for Colorectal Disorders: Implications for Clinical Practice. *Current Gastroenterology Reports*. 2017;19(15):1-8. **2.** Farmer A, Drewes A, Chiarioni G, et al. Pathophysiology and management of opioid-induced constipation: European expert consensus statement. *United European Gastroenterology Journal*. 2019;7(1):7-20.

