

# What Your Poop Says About Your Health

Analysis by [Dr. Joseph Mercola](#)

✓ Fact Checked

January 19, 2023

## STORY AT-A-GLANCE

- › You can learn a great deal about your overall health by taking a look at your stool and noting its color, size, shape, consistency, odor and other features
- › Your toileting habits, such as frequency of elimination and the ease with which you move your bowels, can provide additional clues to your health status
- › Three bowel movements per day to three per week is considered the normal range
- › If you know what to look for, you may be able to detect health problems early enough to stop them in their tracks
- › Most gastrointestinal problems that lead to constipation and diarrhea can be prevented or resolved by making simple changes to your diet and lifestyle

When it comes to toileting habits, the topic is not exactly a favorite among Americans — at least for those above the age of 4. Mention poop and you can easily clear a room — or at the least, generate some unusual facial expressions, nervous laughter and wisecracks about "too much information."

But your bodily emissions are an important health topic that deserves serious attention, regardless of the ick factor. In fact, if you ignore what you deposit in your toilet, you could be flushing your health down the drain. Did you know the average person generates about 12 tons of stool in his or her lifetime?<sup>1</sup> It turns out, there is much to be learned from this mountain of poop.

The shape, size, color and other fecal features can tell you a great deal about your overall health and how your gastrointestinal tract is functioning. It can even give you clues about serious disease processes that could be occurring, like infections, digestive problems and even cancer. Poop comes in just about all the colors of the rainbow – and please forgive me for using the words poop and rainbow in the same sentence.








Although there is a certainly a wide variety of stool colors, textures and forms that are considered "normal," there are definitely things that, if seen or experienced, warrant immediate medical attention. With this in mind, the overview that follows covers what you need to know about what's normal and not normal in the bathroom department.

## **What Is Normal Stool?**

Your stool is about 75% water. The rest is a fetid combination of fiber, live and dead bacteria, miscellaneous cells and mucus.<sup>2</sup> The characteristics of your stool will tell you a good deal about how happy and healthy your digestive tract is. The color, odor, shape, size and even the sound it makes when it hits the water – plus whether it's a sinker or a floater – are all relevant information.

If you're one to poop and scoot quickly out of the bathroom without looking in the toilet, then you might want to slow down and look down. The Bristol Stool Chart is a handy tool that may help you learn what you're going for. Ideally, your stool should approximate Types 3, 4 and 5, "like a sausage or a snake, smooth and soft" to "soft blobs that pass easily." Type 4 is the Holy Grail.

## Bristol Stool Chart

Type 1		Separate hard lumps, like nuts (hard to pass)
Type 2		Sausage-shaped but lumpy
Type 3		Like a sausage but with cracks on its surface
Type 4		Like a sausage or snake, smooth and soft
Type 5		Soft blobs with clear-cut edges (passed easily)
Type 6		Fluffy pieces with ragged edges, a mushy stool
Type 7		Watery, no solid pieces. <b>Entirely Liquid</b>

Fiber tends to bulk up your stool and acts like glue to keep the stool stuck together, instead of in pieces. If your stool is on the softer side, short of diarrhea ("soft serve," as some call it), it could be related to lactose intolerance, artificial sweeteners (sorbitol and [Splenda](#)), or a reaction to fructose or gluten.

## Look, Listen and Smell Before You Flush

What's normal and what's not when you look into the toilet? The following table will help you narrow down what to look for so you aren't needlessly alarmed. Of course, there are a few signs that are cause for concern, and those are listed too. If you have a change in stools accompanied by abdominal pain, please report this to your physician.<sup>3</sup>

## Healthy Stool

## Unhealthy Stool

Medium to light brown

Stool that is hard to pass, painful or requires straining

Smooth and soft, formed into one long shape and not a bunch of pieces

Hard lumps and pieces, or mushy and watery, or even pasty and difficult to clean off

About one to two inches in diameter and up to 18 inches long

Narrow, pencil-like or ribbon-like stools can indicate a bowel obstruction or tumor – or worst case, colon cancer. Narrow stools on an infrequent basis are not so concerning, but if they persist, definitely call your physician

S-shaped, which comes from the shape of your lower intestine

Black, tarry stools or bright red stools may indicate bleeding in the gastrointestinal (GI) tract.

Black stools can also come from certain medications, supplements or consuming black licorice. If you have black, tarry stools, it's best to be evaluated by your health care provider

Quiet and gentle dive into the water. It should fall into the bowl with the slightest little "whoosh" sound – not a loud, wet cannonball splash that leaves your toosh in need of a shower

White, pale or gray stools may indicate a lack of bile, which may suggest a serious problem (hepatitis, cirrhosis, pancreatic disorders or possibly a blocked bile duct), so this warrants a call to your

## Healthy Stool

## Unhealthy Stool

physician. Antacids may also produce white stool

Natural smell, not repulsive (I'm not saying it will smell good)

Presence of undigested food. This is more of a concern if accompanied by diarrhea, weight loss or other changes in bowel habits

Uniform texture

Floaters or splashers

Increased mucus in stool can be associated with inflammatory bowel disease like Crohn's disease, or ulcerative colitis, or even colon cancer, especially if accompanied by blood or abdominal pain

## Does Your Stool Have a Really Bad Odor?

If your stool has an extraordinarily bad odor, it should not be ignored. I am referring to an odor above and beyond the normally objectionable stool odor. Stinky stool can be associated with a number of health problems, such as:<sup>4</sup>

- A malabsorptive disorder
- Celiac disease
- Crohn's disease
- Chronic pancreatitis
- Cystic fibrosis

Cystic fibrosis (CF) is a disease caused by a defective gene that causes your body to produce abnormally thick, sticky mucus, which builds up and causes life-threatening lung infections and serious digestive problems. Most cases of CF are diagnosed before the age of 2, so this is more of a concern with infants and toddlers.

Speaking of malodorous things, what about gas? Passing gas (flatulence) is normal. Not only is it normal, it's a good sign that trillions of hard-working **gut bacteria** are doing their job. People pass gas an average of up to 14 times per day.<sup>5</sup> Ninety-nine percent of gas is odorless,<sup>6</sup> so you may even be unaware you're passing it. Think about it – were it not for an exit, we'd all blow up like balloons.

## **How Often Should You Move Your Bowels?**

Normal bowel habits vary. When we talk about regularity, what we're really talking about is what's regular for you. Three bowel movements per day to three per week is considered the normal range.

What's more important than frequency is the ease with which you move your bowels. If you need to push or strain, something is off. Moving your bowels should take no more effort than urinating or passing gas. The thing to watch for is a sudden change in your bowel habits.

Many factors can affect regularity, such as diet, travel, medications, hormonal fluctuations, sleep patterns, exercise, illness, surgery, childbirth, stress and more.<sup>7</sup>

## **Constipation and Diarrhea**

The average body takes between 18 and 72 hours to convert food into poop and pass it on out. When this time is significantly shortened, the result is diarrhea because your intestine doesn't have time to absorb all the water. Conversely, when transit time is lengthened, you may end up constipated because too much water has been absorbed, resulting in hard, dry stools.

Constipation is defined as passing hard, dry stools that you have to strain to move, and it's typically accompanied by decreased frequency of defecation. Straining is not normal, nor is experiencing feelings of incomplete elimination, bloating, crampiness or sluggishness after going number two. If you're over the age of 65, your risk of becoming constipated increases significantly.

Chronic, untreated constipation can lead to fecal impaction, which can be a serious medical condition. Laxatives should be avoided and used only as a last resort. If you absolutely must use a laxative, make sure it is used for only a very short period of time.

### **Common Causes of INCREASED Bowel Frequency/Diarrhea<sup>8</sup>**

<b>Lifestyle</b>	<b>Diseases and Conditions</b>
Eating more fruits and vegetables (increased fiber)	Hyperthyroidism (overactive thyroid)
Increased exercise	Crohn's disease
Drinking more water	Ulcerative colitis
Emotional stress	Celiac disease
Food allergies	Irritable bowel syndrome (IBS)
	Medication side effects
	Gastrointestinal infection

### **Common Causes of DECREASED Bowel Frequency/Constipation<sup>9</sup>**

## Lifestyle

## Diseases and Conditions

Change in diet, less fiber, less fruits and vegetables

Pregnancy, childbirth or hormonal disturbances

Emotional stress

Problems with the muscles or nerve in the intestine, rectum or anus

Ignoring the urge to "go," travel and scheduling factors that cause you to hold it

Irritable bowel syndrome (IBS)

Insufficient exercise

Neurologic disorders

Inadequate hydration

Hypothyroidism (underactive thyroid)

Calcium or iron supplements

Local pain or discomfort around the anus, such as from fissures or hemorrhoids

Drugs such as narcotic painkillers (codeine, for example), diuretics, antacids, antidepressants and excess or overused laxatives

Colorectal cancer

Food allergies

Multiple organ diseases, such as lupus and scleroderma

## How to Score a Home Run With Your Bowel Movements

Most gastrointestinal problems can be prevented or resolved by making simple changes to your diet and lifestyle. If you aren't achieving poo perfection, or if you don't feel right,



then look at the following factors and consider making a few changes. These strategies will help **reverse constipation** or diarrhea, in addition to helping prevent recurrences.

Remove all **sources of gluten** from your diet. The most common sources are wheat, barley, rye, spelt and other grains

Eat a diet that includes whole foods, such as fresh, organic vegetables and fruits that provide good nutrients and fiber; most of your fiber should come from vegetables, not grains

Avoid artificial sweeteners, excess sugar (especially fructose), chemical additives, MSG, excessive amounts of caffeine and ultraprocessed foods, as they are all detrimental to your gastrointestinal (and immune) function

Boost your intestinal flora by eating **fermented foods** such as sauerkraut, pickles and kefir (if you tolerate dairy) that have naturally occurring probiotics.

Try increasing your fiber intake; good options include organic psyllium seed husk, artichoke, baked sweet potato with the peel intact, spinach, broccoli, Brussels sprouts, cauliflower and many other vegetables.

Make sure you stay well hydrated with fresh, pure water

My recommendation for daily fiber intake is 25 to 50 grams per 1,000 calories consumed

Get plenty of exercise daily

Avoid medications such as painkillers like codeine or hydrocodone, which will slow your bowel function; antidepressants and antibiotics can also cause a variety of GI disruptions

Address emotional challenges with tools like the [Emotional Freedom Techniques \(EFT\)](#)

Consider squatting instead of sitting to move your bowels. Squatting straightens your rectum, relaxes your puborectalis muscle and encourages the complete emptying of your bowel without straining.

An inexpensive foot stool can help you achieve the proper squatting position while keeping you stable

## Consider a Bidet

As a practical and affordable alternative to toilet paper, you might want to try a bidet. Bidets are the norm in Europe – it's the rare bathroom that is found without one. Once you experience a bidet, you'll probably never go back to toilet paper. A bidet is refreshing in a way toilet paper will never be, is gentler and less irritating than wiping with paper, and reduces hand contamination.

Whenever I travel it is one of the items that I miss most from my home, and nearly everyone that I know who has one just loves it. A bidet pays for itself in no time with the money saved on toilet paper, as well as helping save valuable environmental resources.

You still need a sheet or two of toilet paper to dry yourself, but that is a tiny fraction of what you would need to clean yourself. More importantly, a bidet cleans your bottom far more effectively than dry toilet paper. They are easy to install, as no plumber is required.

## Sources and References

---

- [1 Daily Mail March 22, 2018](#)
- [2 EverydayHealth](#)
- [3 Ezine Articles](#)
- [4 MedlinePlus](#)

- <sup>5</sup> National Institute of Diabetes and Digestive and Kidney Diseases, Symptoms & Causes of Gas in the Digestive Tract
- <sup>6</sup> Vox December 4, 2014
- <sup>7</sup> The New York Times August 2, 2005
- <sup>8</sup> Mayo Clinic, Frequent Bowel Movements, Symptoms
- <sup>9</sup> Cleveland Clinic, Constipation