

What Should Your Poop Look Like?

Analysis by [Dr. Joseph Mercola](#)

✓ Fact Checked

July 09, 2022

STORY AT-A-GLANCE

- › The Bristol stool chart is widely used as a tool to help patients identify their type of stool when seeing their doctor
- › The seven-point scale ranges from constipation (Type 1) to diarrhea (Type 7), with a variety of consistencies in between
- › Type 1 is an indication that a person is very constipated, while Type 2 is associated with slight constipation
- › Types 3 and 4 are normal and ideal, while Type 5 is a sign that you may be lacking fiber. Types 6 and 7, diarrhea, signal inflammation
- › While it's normal for your stool to fluctuate from day to day, particularly if you have changes in your diet, you should be aiming for Types 3 and 4 most of the time, with a soft consistency, smooth texture and shape like a sausage, snake or torpedo

This article was previously published February 2, 2019, and has been updated with new information.

The size, shape and color of your stool give valuable clues as to the state of your health. It's so important, in fact, that in 1997 Stephen Lewis and Ken Heaton with the U.K.'s Bristol Royal Infirmary teaching hospital developed what's now known as the Bristol stool chart.

The chart, formally known as the Bristol stool form scale, was developed after the team conducted a study showing the chart's usefulness for monitoring changes in intestinal function.¹

If you're in the habit of fast flushing, i.e., you poop and flush without looking at the contents, you should make a point to look at your stool and observe what it may be telling you. The Bristol stool chart is an easy reference point to help you determine if your stool is in the ideal range or not – and what that may mean for your health.








Bristol Stool Chart: Types 3 and 4 Are Ideal

The Bristol stool chart is widely used as a tool to help patients identify their type of stool when seeing their doctor. The seven-point scale ranges from constipation (Type 1) to diarrhea (Type 7), with a variety of consistencies in between. Type 1 is an indication that a person is very constipated, while Type 2 is associated with slight constipation.

Types 3 and 4 are normal and ideal, while Type 5 is a sign that you may be lacking fiber. Types 6 and 7, diarrhea, signal inflammation. While it's normal for your stool to fluctuate from day to day, particularly if you have changes in your diet, you should be aiming for Types 3 and 4 most of the time.

"An ideal stool looks like a torpedo – it should be large, soft, fluffy and easy to pass," according to Dr. Amy E. Foxx-Orenstein, former president of the American College of Gastroenterology.² Other descriptions for ideal stool include looking like a sausage or snake.

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. Entirely Liquid

What Determines the State of Your Stool?

The consistency of your stool is largely determined by its water content. If food travels rapidly through your intestinal tract, it will absorb a limited amount of water, leading to loose or liquid stools. A slower transit time allows for more extensive water absorption from the stool in the colon, which leads to harder more formed stools upon their exit.³

At one end of the spectrum, loose stools, or diarrhea, are usually the result of infection in the gastrointestinal tract, and occur when food and fluids move rapidly through your digestive tract. Although the time food takes to digest varies from person to person, it

normally takes between six and eight hours from the time you eat food until it reaches your small intestines.

From there it travels to the large intestines and is finally eliminated. The average transit time is between 33 and 47 hours, depending upon your age and sex and the type of food eaten.⁴ If a pathogen enters your system, diarrhea is your body's way of helping to clear it.⁵

The most common cause of acute diarrhea in the U.S. may be attributed to several different types of bacteria: salmonella, Campylobacter, shigella or E. coli.⁶ In other cases diarrhea may be called "functional" as a clear trigger cannot be identified.

Functional diarrhea may be caused by irritable bowel syndrome or inflammatory bowel disease, for instance. Other causes of diarrhea include drugs, endocrine disease, cancer, lactose intolerance, malabsorptive disease such as celiac disease, or a reaction to **fructose** or gluten. At the other end of the spectrum is constipation, signaled by hard, dry, lumpy stool.

Poor nutrition, lack of exercise, not drinking enough water and a low-fiber diet are just some of the factors that can lead to constipation, a condition that affects up to 16% of Americans chronically.⁷

Stool Consistency May Be Associated With Pain

The Bristol stool chart may be useful for assessing more than just the state of your gastrointestinal tract and stool consistency, as research suggests the latter may be associated with a person's perception of pain.

The researchers suggested that because the gut microbiome influences health via the gut-brain axis, pathogenic bacteria in the gut could lead to both pain and altered stool consistency. Indeed, they found that stool form was associated with pain perception and anxiety status.

"Especially, abnormally liquid stool was more related to pain sensitization and anxiety status than hard stool," the researchers noted. "These findings indicate that the microbiota dysbiosis might be involved in pain sensitization and psychologically low states. Thus, our results suggest that assessing stool form in patients with chronic pain is important."⁸

In short, if your stool falls outside of the normal spectrum on a regular basis, especially toward Types 5, 6 or 7, it's a sign that your gut is likely imbalanced, a condition that could affect your overall physical and mental health.

For example, in patients with irritable bowel syndrome (IBS), which often causes loose stools, the nerves in the gut are far more active than in healthy people, which has led researchers to speculate that the pain IBS patients suffer is the result of a hypersensitive nervous system and may explain why IBS is frequently brought on by stress or emotional trauma.⁹

What Is Poop, Exactly, and How Often Should You Go?

Poop, also known as stool, feces and excrement, is made up mostly of water (about 75%). The remaining 25% is made up of a combination of dead bacteria, indigestible food matter, cholesterol, fats, protein and inorganic substances such as calcium phosphate. Debris from the mucous membrane of your intestinal tract, bile pigments (bilirubin) and dead white blood cells also collect in your stool.¹⁰

On average, adults pass about 3 to 8 ounces of feces daily, typically broken up one to three times a day.¹¹ That being said, there's a wide variation in what's considered normal bowel-movement frequency. Specifically, three bowel movements per day to three per week may be normal for you, and the frequency may change from day to day or week to week. This is because many factors influence your bowel habits, including:

Diet	Travel
Medications	Hormonal fluctuations

In a study of 268 adults between the ages of 18 and 70, researchers confirmed that a wide variance in bowel habits is normal. Ninety-eight percent of the participants had a bowel movement frequency ranging from three times weekly to three times daily, and both ends of the spectrum were considered normal.¹²

Further, while straining to make a bowel movement or feeling an urgency to go can be signs of a medical issue, they may also fall in line with what's normal. "Some degree of urgency, straining and incomplete evacuation should be considered normal," the researchers noted. During the weeklong study, urgency was reported by 36% of participants, straining by 47% and incomplete defecation by 46%.

Signs of Healthy Stool

The size and shape of your stool are only two indications of whether your stool is healthy and normal. Other important factors to take note of include the following, which can signal whether your stool is healthy or not:

Healthy Stool

Medium to light brown

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

Unhealthy Stool

Stool that is hard to pass, painful or requires straining

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

Healthy Stool

About 1 to 2 inches in diameter and up to 18 inches long

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

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

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

Unhealthy Stool

Narrow, pencil-like or ribbon-like stools can indicate a bowel obstruction or tumor; narrow stools on an infrequent basis are not so concerning, but if they persist, definitely make a call to your physician

Black, tarry stools or bright red stools may indicate bleeding in the gastrointestinal 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

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 physician.

Antacids may also produce white stool

Yellow stools may indicate giardia infection, a gallbladder problem, or a condition known as Gilbert's syndrome. If you see this, call your doctor

Healthy Stool

Unhealthy Stool

Uniform texture

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

Sinks slowly

Floaters or splashers

Increased mucus in stool – This 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

Very 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 a malabsorptive disorder, Celiac disease, Crohn's disease and chronic pancreatitis

What to Do if Your Poop's Not Ideal

If your stool tends to be either too hard or too watery, pay attention to your diet. If you're constipated, be sure you're drinking enough water, as dehydration is a common cause. Also important, whether your stools are hard or loose, is to increase your fiber intake; good options include psyllium and freshly ground organic flaxseed (shoot for about 25 to 50 grams of fiber per 1,000 calories consumed daily).

Boosting the health of your intestinal flora by adding naturally fermented foods into your diet, such as sauerkraut, pickles and kefir (if you tolerate dairy), is also important, although you can add a probiotic supplement if you suspect you're not getting enough beneficial bacteria from your diet alone.

Removing all sources of gluten from your diet (the most common sources are wheat, barley, rye, spelt and other grains) can also help you optimize your bowel habits, and be sure to focus your diet on whole foods rich in organic vegetables, while avoiding sugar, artificial sweeteners and processed foods.

Exercise can also help keep your gastrointestinal tract in good working order. It's also important to relieve stress daily with tools like the [Emotional Freedom Techniques \(EFT\)](#). Last, but certainly not least, you may want to change the position you're using to poop, namely giving squatting a try.

When you sit on a typical toilet, your puborectalis muscle, which is involved in bowel control, cannot fully relax. This is why you may need to push or even strain in order to have a bowel movement. While squatting, the puborectalis muscle relaxes fully, making elimination easier, which is why many experts believe squatting is the perfect position to poop.

Squatting, along with the lifestyle changes mentioned above, can go a long way toward getting your stool into the ideal Types 3 and 4 range, but if problems persist, schedule a visit with your holistic health care provider to rule out a medical problem.

Sources and References

- [1 Scand J Gastroenterol. 1997 Sep;32\(9\):920-4](#)

- ² [StoolAnalyzer.com](#)
- ³ [Alimentary Pharmacology and Therapeutics August 5, 2016](#)
- ⁴ [Mayo Clinic, Digestion: How Long Does it Take](#)
- ⁵ [Cell Host Microbe. 2017 Jun 14;21\(6\):671-681](#)
- ⁶ [Medical News Today January 4, 2017](#)
- ⁷ [Gastroenterology 2013;144\(1\):218](#)
- ⁸ [PLoS One. 2017; 12\(8\): e0182859](#)
- ⁹ [Nat Rev Gastroenterol Hepatol. 2011 Jun; 8\(6\): 349–355](#)
- ^{10, 11} [Encyclopedia Britannica, Feces](#)
- ¹² [Scand J Gastroenterol. 2010 May;45\(5\):556-66](#)