SYMPTOM

Stools - foul smelling

Foul-smelling stools are bowel movements with an unusually strong or unpleasant odor.

WHAT IT FEELS LIKE
Bowel movements smell much stronger or more unpleasant than usual

WHERE IT IS FELT
Usually noticed in the toilet rather than felt

MOST COMMON CAUSES
Diet changes, short-lived diarrhea, food intolerance

WHEN IT IS URGENT
Bloody or black stool, severe pain, or dehydration

USUALLY LASTS
Days after diet changes; longer when digestion is affected

SEE A DOCTOR IF
Persistent, recurring, greasy, pale, or accompanied by weight loss

Overview

Stool normally has an unpleasant smell. Its odor comes from food, gut bacteria, and substances produced during digestion. What counts as unusually foul smelling can differ from person to person.

A brief change in odor is often linked to something you ate or a short-lived stomach infection. Odor alone usually does not point to a particular condition.

Other changes matter more than smell. Notice whether the stool is watery, greasy, pale, black, bloody, difficult to flush, or different from your usual pattern. Symptoms such as weight loss, fever, abdominal pain, or vomiting can also help identify the cause.

What it may feel or look like

The odor may be much stronger, more sour, or more offensive than usual. You may notice it during one bowel movement or over several days.

Depending on the cause, the stool may also be:

You might also have bloating, excess gas, cramps, nausea, urgency, or more frequent bowel

movements. Greasy, bulky stool can occur when the body does not absorb fat properly. This is called fat malabsorption .

- Loose or watery
- Bulky, greasy, or difficult to flush
- Pale or clay colored
- Floating, although floating alone is often caused by gas
- Accompanied by mucus or blood

Common causes

Common causes

Food can temporarily change stool odor. Eggs, meat, dairy products, strongly seasoned meals, and some vegetables may produce stronger-smelling gas or stool. A major change in diet can also alter the bacteria living in your gut.

Short-lived diarrhea commonly changes both the smell and consistency of stool. It may follow a viral or bacterial stomach infection. Symptoms often include cramps, nausea, or an urgent need to use the toilet.

Food intolerance is another possibility. For example, trouble digesting lactose, the sugar in milk, may cause diarrhea, gas, and bloating after dairy products. This is different from a food allergy.

Medicines and supplements can change digestion or gut bacteria. Antibiotics like amoxicillin or doxycycline are a common example. Iron and some other products may alter stool color, although color changes should not automatically be blamed on a medicine.

Less common causes

Ongoing foul-smelling, greasy stool may suggest that nutrients are not being absorbed normally. Possible causes include celiac disease, which is an immune reaction to gluten, or exocrine pancreatic insufficiency, in which the pancreas does not release enough digestive enzymes.

Giardia, a parasite that can spread through contaminated water, food, surfaces, or close contact, may cause particularly foul-smelling diarrhea, gas, cramps, and greasy stool.

Conditions affecting the liver, gallbladder, bile ducts, or small intestine can also interfere with fat digestion. These often cause additional signs, such as pale stool, yellow skin or eyes, weight loss, or ongoing abdominal discomfort.

Causes needing prompt assessment

Frequent watery diarrhea during or soon after antibiotic treatment can be caused by Clostridioides difficile , often shortened to C. diff . It needs medical assessment, especially when accompanied by fever, pain, or dehydration.

Black, sticky, tar-like stool can indicate bleeding higher in the digestive tract. Red or maroon blood may come from lower down. Some foods and medicines can darken stool, but unexplained black or bloody stool should not be judged by smell alone.

When to seek medical care

Seek emergency help if you have foul-smelling stool along with:

Arrange same-day medical advice for blood in the stool, repeated vomiting, a high fever, worsening pain, or difficulty keeping fluids down. You should also seek prompt advice for frequent watery diarrhea during or after antibiotics.

Book a routine appointment if the change lasts longer than about two weeks, keeps returning, or occurs with greasy or pale stool. Other reasons to make an appointment include unexplained weight loss, ongoing bloating, persistent diarrhea, yellow skin or eyes, or a major lasting change in bowel habits.

Children, older adults, and people with weakened immune systems can become dehydrated more quickly. Seek advice earlier if fluid intake or urination is falling.

- Heavy rectal bleeding or black, tar-like stool with faintness
- Severe or constant abdominal pain
- Confusion, collapse, or difficulty staying awake
- Signs of severe dehydration, such as very little urine and marked dizziness

How the cause is found

A healthcare professional may ask when the change began and whether it followed travel, untreated water exposure, illness, antibiotics, or a new diet. Details about stool color, consistency, frequency, and whether it is greasy or difficult to flush are useful.

Testing is not always needed after a brief, improving episode. When symptoms continue, tests may include:

Imaging or an examination of the digestive tract may be considered when symptoms or test

results suggest a structural problem.

Do not begin a strict gluten-free diet before celiac testing unless advised to do so. Avoiding gluten beforehand can make the test results less reliable.

- Stool tests for infection, parasites, blood, or inflammation
- Blood tests for anemia, inflammation, liver problems, or poor nutrition
- Blood tests for celiac disease
- A stool test for pancreatic enzyme function

Treatment and self-care

Treatment depends on the cause rather than the odor itself. A temporary food-related change may settle without treatment. If you have diarrhea, drink fluids regularly. Oral rehydration solutions can help replace water and salts when losses are more significant.

Continue eating as tolerated. A brief record of foods, medicines, bowel movements, and other symptoms may reveal a pattern. Avoid removing several food groups at once without professional advice, as restrictive diets can lead to nutritional gaps.

Wash your hands with soap and water after using the toilet and before preparing food. This helps limit the spread of infectious diarrhea. Do not prepare food for others while you have active diarrhea.

Antibiotics do not treat most short-lived diarrheal illnesses and may sometimes make diarrhea worse. Treatments such as pancreatic enzymes, parasite medicines, or a medically supervised gluten-free diet are used only when the relevant cause has been identified.

What to expect

Odor caused by food or a brief stomach illness often improves within several days as your diet and bowel movements return to normal.

Symptoms caused by an intolerance, infection, or absorption problem may continue until the underlying issue is addressed. Improvement may be gradual, and stool odor may change before or after other symptoms settle.

A single strong-smelling bowel movement is usually less informative than a persistent pattern. Track changes in consistency, color, frequency, pain, and weight rather than relying on smell alone.

Common questions

Does foul-smelling stool mean I have an infection?

Not necessarily. Food and changes in digestion are common explanations. Infection is more likely if you also have new diarrhea, cramps, fever, vomiting, or a relevant exposure.

Is floating stool a sign of poor absorption?

Not by itself. Stool often floats because it contains trapped gas. Repeatedly greasy, bulky, foul-smelling stool that is difficult to flush is more suggestive of fat malabsorption.

Should I stop eating gluten?

Not before speaking with a healthcare professional if celiac disease is being considered. Celiac blood tests are most accurate while you are still eating gluten.

Can antibiotics cause this symptom?

Yes. Antibiotics can change gut bacteria and stool odor. Frequent watery diarrhea during or after antibiotics needs prompt medical advice because it can sometimes be related to C. diff .

Sources

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