

Fact Sheet

Constipation



Some children go to the toilet to pass a bowel motion two or three times a day. Others may go only twice a week, without problems. "Constipation" is when your child has difficulty passing a bowel motion or stool because it is hard, painful and/or infrequent.

What's the Problem?

Your child may be constipated if he or she:

Says it hurts to pass stool (poo)

When this happens, your child will not want to go to the toilet as often. Pain makes it more difficult to poo/pass stool. Hard stool may tear the anus (back passage) causing pain and bleeding. This may also lead to a pattern of "holding on" and avoiding passing a stool.

Passes stool in his / her pants without meaning to

Sometimes kids who are constipated have runny stools, which they can't control due to overflow of liquid stool around constipated older stool that is stuck there. This may soil their underwear. If this happens regularly, see your doctor who may prescribe medication.

Has tummy pains that may come and go

What causes constipation?

It is not always clear why children become constipated. Causes may include:

1 **Holding onto stools.** Sometimes children put off going to the toilet because they are too busy or avoid passing stool because it hurts. Others don't want to use

preschool or school toilets due to smelly toilets, lack of privacy or teasing. Waiting too long to go to the toilet can cause the stool to build up in the bowel and it may also become very hard. The large amount of retained hard stool may stretch the lower bowel and it may not work normally.

2 **Not enough fibre from food.** Fibre helps our bowels to work properly and regularly. We all need to eat fibre-containing foods such as wholemeal or grain bread, fresh fruit and vegetables every day. Having foods with fibre will help to keep your child's bowels working regularly.

3 **An illness,** such as tonsillitis, where your child eats and drinks less.

4 **Some underlying medical conditions** may also cause constipation. However, these are uncommon in children. Your doctor will be able to work out if any tests are necessary for your child.

What to do

It is important to get rid of the hard stool and let the bowel recover from being stretched and to keep the stool soft enough to be passed without pain. Usually a stool that is as soft as toothpaste can be passed without pain. There are different ways of treating constipation. Whilst it is important that your child eats a high fibre diet, the best chance of fixing constipation is with special medications (laxatives) and correct toileting behaviour.

A stimulant laxative may sometimes be needed to clear a hard lump of stool. Movicol or Sennekot can be used in this way.

Fact Sheet

Constipation



Liquid Paraffin (eg Parachoc) softens the stool and makes it easier to pass, but should not be given to children with Cerebral Palsy or other children with a tendency to gastro-oesophageal reflux. .

Children may then need to continue other medications to keep the stool soft and easy to pass with no pain or straining. These medicines include liquid paraffin, Movicol, lactulose (Duphalac, Actilax) sorbitol (Sorbilax) and polyax. Some people prefer benifibre. All of these are safe in children over 1 year of age, and they are safe when used for short or long times. Some other medicines that can be used in adults are not usually used in children. Your doctor will give you advice about the type of laxative or stool softener that is right for your child and how long your child will need this help. It is important to follow their instructions carefully. Your child needs to drink plenty of fluids when they are taking these medications.

How to prevent further problems

Having enough fibre is a good lifelong habit for everybody. To prevent constipation, combine food containing enough fibre with lots of fluids and daily exercise. Increasing the fibre and having extra drinks will not usually treat constipation – but these can be important to prevent it coming back after things have improved with the above treatments. Encourage your child to go to the toilet regularly - at least once a day – after meal times is a good time. Teach them to go to the toilet when they feel the urge/need to go (and not to hold on!). It is very important that a child is encouraged in correct toileting behaviour and not criticised or punished.

Ways to increase fibre... you may like to try some of these ideas....

Try wholegrain breads and cereals

- For breakfast cereals include Weetbix™ / Vitabrits™, Shredded Wheat™, Puffed Wheat™, muesli, porridge, Mini Wheats™, Fruity Bix™.
- For breads, muffins, cereals and crackers, use wholemeal, wholegrain, high fibre white or rye.
- Try wholemeal pasta or brown rice.
- Try adding some wholemeal flour and fruit when cooking biscuits or cakes. (We recommend that you use ground nuts in cooking for children under 5 years of age so that there is no risk of them accidentally choking).

Eat plenty of fruit and vegetables

- Include fresh, frozen and canned varieties.
- Dried fruit can also be included, eg dried apricots, dried apple, prunes.
- Prunes and kiwifruit also contain a natural laxative (you can also try prune juice, start with about 50 ml per day and increase gradually if necessary).
- Legumes and pulses contain large amounts of fibre, eg baked beans, lentil soup, pea and ham soup, lentil burgers, chilli beans, chilli con carne and burritos.

Fact Sheet

Constipation



Include nuts

For example, spread peanut butter or other nut pastes on bread or crackers, include nuts in cooking, eg, stir fries or in cakes and biscuits or as a snack (we recommend you use ground nuts in cooking for children under five years of age so that there is no risk of choking).

Special note on bran

- Bran is another source of fibre, but is NOT recommended for infants and toddlers. It is always better to eat high fibre foods than take supplements such as bran. This is because bran may interfere with the absorption of minerals, such as iron and zinc.
- Small amounts of bran can be used cautiously in older children (over 10 years) and remember to provide plenty of fluid at the same time.

Ways to include enough fluid

- Include at least four to five glasses of fluid each day, especially water, or diluted juice. Some fruit juices for example prune, apple and pear juice contain a natural poo softener.

To manage constipation in children with gastrostomy or nasogastric tubes, ask your dietitian about the following:

- 1 *Enough fluid.*
- 2 *Using a feed with fibre.*
- 3 *Adding soluble fibre to the feeds, (eg Benefiber™).*
- 4 *Including prune juice.*

Remember

- Make sure that your child eats a fibre-rich diet, drinks plenty of fluids and has regular exercise.
- Constipation can, and often does, happen again.
- Treatment of constipation often takes time.
- Plan a toileting program.
- Encourage your child to go to the toilet at least once a day.
- Avoid overusing laxatives.
- It is important that medicines are used as directed. Always follow the advice of your doctor.

This fact sheet is for education purposes only.
Please consult with your doctor or other health professional
to make sure this information is right for your child.

This document was reviewed on Thursday 11th December 2008.

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