

Constipation in children

What is constipation?

Constipation is when your child has a hard, dry bowel motion (faeces, stool or poo) that is difficult to pass. It may cause straining, pain and discomfort.

Toilet habits vary from child to child. A breast fed baby may have a bowel motion after every feed or only every seven to 10 days. Most toddlers have somewhere between one bowel motion every two or three days to three movements daily. If your child goes only once or twice a week, this is not constipation, unless the bowel motion is hard and painful to pass.

It is common for children under six months of age to strain before passing a soft bowel motion. This is not constipation, but rather reflects a slowly developing skill/ability to co-ordinate a bowel action.

What causes constipation?

Constipation is a common problem in children, particularly around the time of toilet training or starting solids. In most cases of constipation no serious cause is found. Some possible reasons include:

- **Diet** – especially when there is a change in diet, such as when a baby is weaned off the bottle or the breast, or in the toddler years when new tastes are developed. Milk formula fed babies and children who drink large amounts of cow's milk each day may become constipated. A diet high in processed foods and low in fresh fruits and vegetables can also lead to constipation. Not drinking enough fluid can worsen constipation.
- **Toilet habits** – children put off going to the toilet for many reasons. Often they are just too busy playing. Waiting too long to go to the toilet can cause the faeces to become hard. A very constipated child may lose some sensation in the rectum (back passage), and not feel the urge to go to the toilet. Going to the toilet can also become a problem after a child has had a painful or frightening bowel movement.
- **A change in toilet environment** – such as new or undesirable school toilets, or being told to hold on when they feel the urge to go (typically at school)
- **Natural tendency** – some children may have slow gut movement, despite a good diet
- **Illness** – any illness that decreases the child's activity can cause constipation. There are some rare diseases that lead to constipation. The doctor will have assessed your child for these.

What are the symptoms?

Symptoms that your child may develop when constipated can include:

- Saying it hurts to go to the toilet
- Tummy pain and cramps – the pain tends to come and go
- A 'bloated' or big tummy
- Not feeling hungry or wanting to eat
- Being irritable or less interested in usual activities
- Signs of holding on (such as crossing legs, crying or refusing to sit on the toilet)
- A tear or crack in the skin next to the anus, which can bleed and be painful – this can be caused by straining to pass a large, hard bowel motion
- Passing faeces in the underpants (for toilet trained children). This can happen in long-term constipation when the rectum is full of faeces for a long time and it becomes stretched. The urge to go to the toilet decreases and the faeces can then pass into the child's pants, without them feeling it.

Treatment

While laxatives are available over the counter at pharmacies it is recommended that children only take laxatives after seeking medical advice. There are many different types of laxatives, with most being taken orally. Occasionally the doctor may recommend use of suppositories and/or mini-enemas – these are small tablets or liquid that is placed into the child's rectum, which stimulate the rectum to empty. Only give an enema to your child when directed by your doctor.

- **Liquid paraffin mixtures** come as a flavoured liquid, and work by lubricating the stool to make it easier to pass
- **Macrogol3350®** comes in sachets to mix with water and works by softening the stool
- **Lactulose®** comes as a sweet-tasting liquid, and works by softening the stool and stimulating the bowel to empty. It can be mixed with juice or milk to improve the taste.
- **Senna** tablets and **Dulcolax®** drops both stimulate the bowel to empty. They can cause abdominal cramping and/or diarrhoea if the dose is too high.
- **Psyllium husks** are a natural source of fibre that can be used as a supplement to help soften the stool. It can be mixed in with your child's food.

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- **Suppositories**, such as glycerine, are a type of special coated tablet that is placed in the rectum (bottom) to stimulate the lower bowel into stronger action. Suppositories should only be used for short periods of time and only if oral laxatives have not worked.
- **Enemas**, such as Microlax®, are a fluid that is placed into the rectum to soften the stool and stimulate an urge to go to the toilet

Once the hard faeces has been passed, bowel motions should be kept 'soft' with oral laxatives used regularly until the bowel recovers. If constipation has become chronic it may take many weeks or months for this to occur – it is important to re-establish the rectum and gut function before stopping the therapy. Your local doctor can advise on laxative use and a toileting program.

Home care (of mild constipation)

In babies:

- When making up formula, always measure the water first then add the formula
- Formula-fed infants over one month of age can be offered extra drinks using cooled, boiled water between formula feeds. Breastfed infants may require more frequent feeds, especially in warm weather.
- For babies with constipation who drink formula talk to your doctor about any formula change
- For babies already on solids, offer strained, stewed prunes or apricots three times a week, or give them prune juice diluted with water
- For babies nine months and older, offer baby cereal that contains bran
- A gentle tummy massage or a warm bath may help

In toddlers aged over 18 months:

- Reduce the intake of cow's milk to a maximum of 500ml per day
- Avoid sweet drinks before meals to improve appetite

In older children:

- Offer more fruit - fruits with the peel left on, such as plums, prunes, raisins, apricots and peaches, have a lot of fibre
- Offer at least 3 serves of vegetables each day
- Use wholemeal bread instead of white bread
- Prune juice has mild, natural laxative action and it can be mixed with other juices to taste better. It can also be frozen to make icy poles.
- Offer cereals that are less processed and contain bran, shredded wheat, whole grains or oatmeal
- Make sure children have adequate fluids (water is best but you can offer a variety of drinks to increase the amount that they drink)
- Ensure children exercise daily

Healthy bowel habits

- Have a comfortable toilet for your child to use where their feet can be flat on the ground or supported by a footstool or box in front of the toilet
- Having a favourite book by the toilet might make them feel better
- Teach your child to sit on the toilet regularly (for up to five minutes, after breakfast, lunch and dinner) so they can get used to it. This will encourage them when they feel the urge. One way to do this is by starting a sticker or reward chart.
- Praise your child for sitting on the toilet, even if they don't do a bowel motion

Constipation often happens again. Be understanding and try not to blame your child. With a good diet, regular toilet times each day and careful use of medication, it can be controlled.

Seeking help

Cabrini Emergency Department (ED) is staffed by experienced emergency doctors and nurses 24 hours a day, 7 days per week. If you have any questions about your ED treatment our qualified ED staff can be contacted on **(03) 9508 1500** at any time. If you need to return to Cabrini ED for ongoing care we would be glad to take care of you again and if this occurs within a week of your initial consultation the doctor's fee will be bulk-billed.

You can also expect to receive a phone call or SMS message from one of our emergency nurses the day after you have been discharged. The nurse will be able to clarify any aspect of your diagnosis, treatment, or follow-up.

In a medical emergency return to Cabrini ED if it is safe to do so or go to the nearest hospital emergency department or call an ambulance – dial triple zero (000).

Seek urgent medical care if:

- **Your child becomes unwell with fever or vomiting**
- **Abdominal pain develops that is more persistent or severe eg. stops normal activities**
- **The constipation is not improving despite treatment**
- **You are worried for any other reason**

Want to know more?

- Contact Cabrini ED on **(03) 9508 1500**
- Ask your local doctor or healthcare professional
- Visit the Royal Children's Hospital website www.rch.org.au/kidsinfo
- Visit the Better Health Channel at www.betterhealth.vic.gov.au