Constipation and Your Child

Constipation is a common problem in children. Children with constipation have stools (also called poops or bowel movements [BMs]) that are hard, dry, and difficult or painful to get out. Some children with constipation have infrequent stools. Although constipation can cause discomfort and pain, it's usually temporary. If left untreated, symptoms could get worse.

Here is information from the American Academy of Pediatrics about constipation (signs and symptoms, causes, treatment) and how to help your child develop good bowel habits.

What is a normal bowel pattern?

Bowel patterns (when and how often stools are passed) vary from child to child just as they do in adults. What's normal for your child may be different from what's normal for another child. Most children have BMs 1 or 2 times a day. Other children may have BMs every 2 to 3 days.

What are signs and symptoms of constipation?

Signs and symptoms of constipation may include

- · Hard or painful stools
- · Many days between BMs
- · Bleeding from the child's bottom where stool comes out
- · Stomachaches, cramping, and nausea
- Soiling (brownish wet spots in the underwear) (See the What is encopresis? section.)

Your child may also

- · Have BMs that stop up the toilet.
- · Make faces while they pass a BM, as if they are in pain.
- Clench his bottom when having a BM. Although this behavior may look like your child is trying to push the stool out, he may be really trying to hold it in because it hurts to come out.

Call or schedule a visit with your child's doctor if your child doesn't have a BM at least every 2 to 3 days or if passing a stool hurts your child.

What is encopresis?

Sometimes a child with bad constipation may pass BMs that look like diarrhea. When a child holds back stools, the stools build up and get bigger. They may get so big that the rectum stretches. Then the child may not feel the urge to go to the bathroom. The stool gets too big to pass without an enema, laxative, or other treatment.

Sometimes only liquid stool or solid smears can come out, and they leak onto the underwear. This is called *encopresis*. Talk with your child's doctor about treatment. It can get better, but it takes months.

What causes constipation?

Here are some causes of constipation.

- Holding back, or withholding, stool. Your child may not want to have a BM for different reasons.
- Your child may try not to go because it hurts to pass a hard stool.
 (Diaper rashes can make this worse.)
- o Children aged 2 to 5 years may want to show they can decide

things for themselves. Holding back their stools may be their way of taking control. This is why it is best not to push children into toilet training.

- Sometimes children don't want to stop playing to go to the bathroom.
- Older children may hold back their stools when away from home (such as camp or school). They may be afraid of or not like using public toilets.
- Illness. If your child is sick and loses his appetite, a change in his diet can throw off his system and cause him to be constipated. Constipation may be a side effect of some medicines or may result from certain medical conditions, such as hypothyroidism (underactive thyroid gland).
- **Diet.** Not enough fiber or liquid in your child's diet doesn't cause constipation. However, not consuming enough of the recommended amounts of healthy foods from the 5 food groups, including foods that are good sources of fiber, may affect your child's bowel patterns. (See the How much fiber does my child need? section.)
- Other changes. In general, any changes in your child's routine, such as traveling, hot weather, or stressful situations, may affect his overall healthand how his bowels function.

How is constipation treated?

Treatment is based on your child's age and how bad the problem is. Usually no special tests are needed.

Constipation can get worse if it isn't treated. The longer stool stays inside the large intestine (or colon), the larger and drier it gets. Then it hurts to pass it. This starts a cycle. The child becomes afraid to have a BM and holds it in even more.

For babies

Constipation is not commonly a problem in babies. It may become a problem when starting solid foods, and your doctor may suggest changes in diet or prescribe a medicine to help soften and pass the stools. Inability to pass stools in a newborn (younger than 1 month) can be a serious concern, and you should see your baby's doctor.

For children and teens

Your child's doctor may prescribe medicine to soften or remove the stool. Do not give your child laxatives or enemas unless you check with the doctor. These drugs can be harmful to children if used wrong.

After the stool is removed, your child's doctor may suggest ways you can help your child develop good bowel habits to prevent stools from backing up again.

How can I help my child develop good bowel habits?

Here are tips to help your child develop good bowel habits.

 Help your child set a toilet routine. Pick a regular time to remind your child to sit on the toilet daily (such as after breakfast). Put something under your child's feet to press on. This makes it easier to push BMs out.

- Make sure your child is consuming the recommended amounts of healthy foods from the 5 food groups, including foods that are good sources of fiber.
- Encourage your child to play and be active.

How much fiber does my child need?

There are different fiber recommendations for children based on energy needs, age, and weight. A normal fiber intake is recommended in children with constipation. The following can be useful strategies:

• Eat 5! A simple way to make sure your child is getting enough fiber is by making healthful food choices. If your child is eating at least 5 servings of fruits and vegetables each day along with other foods that are good sources of fiber, there is really no need to count fiber grams.

• Add 5! If you find it helpful to keep track of total grams of fiber that your child is eating, add 5 to your child's age. For example, a 5-year-old would need about 10 grams of fiber each day. (The total daily recommended amount of up to 25 grams for adults can be used as a general guideline for children.) Some foods are high in fiber. Beans, vegetables, fruits, and whole grains are good sources of fiber.

Remember

If you have any questions or concerns about your child's health, contact your child's doctor.





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The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances. Information applies to all sexes and genders; however, for easier reading, pronouns such as he are used in this publication.



