

Childhood Constipation

What is Constipation?

- *Recurrent painful passage of stools for greater than 2 weeks at any age
- *Fewer than 3 stools per week in a child over 1 year of age
- *More than 4 days without a stool in a child over 1 year of age, or more than 7 days in an infant
- *The inability to pass stools despite the urge, discomfort, or pain

What is not Constipation?

- *Large bowel movement at regular intervals without pain or staining
- *Regular soft stools in an infant with straining. Infants often strain, grunt, pull up their legs, and become red in the face with stooling. It can be difficult for a young baby to coordinate the passage of a bowel movement, especially lying down. This is called Grunting Baby Syndrome, and usually resolves between 2 and 4 months of age
- *Stools passed without pain or straining every 2-3 days, and are soft

What are Possible Causes, or Combination of Causes for Childhood Constipation?

- *Inadequate amounts of fluid intake over days, weeks, or months
- *Inadequate dietary fiber intake
- *Over abundance of starchy foods (especially carbohydrates) in the child's diet
- * Over abundance of dairy products in the child's diet
- *Voluntary *withholding* of stool for fear of painful bowel movement, due to *past* painful bowel movement (This is especially common in older toddlers and preschoolers)
- **Forced* toilet training, leading to anxiety and tension, or voluntary withholding as a way to exert control
- *Repeatedly waiting too long to go to the toilet

What Should I Know About My Infant's Diet?

- *Baby food low in fiber and high in starches, which may worsen constipation, include **carrots, sweet potatoes, squash, bananas, applesauce, and rice cereal**. You *do not need to avoid* these foods, but rather avoid pairing them at a meal. Instead, balance these foods with foods that are high in fiber and low in starch.
- *Baby foods higher in fiber and lower in starch, include **oatmeal cereal, barley cereal, apricots, prunes, peaches, green beans, peas, and spinach**.
- *Infants without constipation should avoid fruit juices until at least 6 months of age. However, if instructed by your physician or nurse, up to 4 ounces per day may be given to aid constipation. Juices containing sorbitol are best, such as **apple juice, pear juice, and prune juice**.
- *Adding extra water to the infant's daily fluid intake is always ok, and may also aid constipation
- *While in some cases constipation is caused solely by cow-milk based formula (Similac, Enfamil, Carnation Good Start, WalMart brand ...) do not switch to soy formula (Isomil, Prosbee ...) without consulting the nurse or physician. If advised, a minimum of 10 day trial of soy is needed to determine if any benefit

What Should I Know About My Older Child's Diet?

- *Increase your child's daily water intake to 16-24 ounces per day
- *Fruit juices, as mentioned above, may be given up to *8 ounces* per day
- *Make sure your child is eating *fruits and/or vegetables with every meal!* Examples include **prunes, raisins, figs, dates, peaches, pears, apples, apricots, beans, celery, peas, cauliflower, broccoli, spinach, and dark salad greens.** Keep bananas, potatoes, and applesauce to a minimum.
- *Make sure your child is eating a *healthy grain source with every meal!* Examples include **bran cereal, Cheerios, oatmeal, cream of wheat, bran muffins, . shredded wheat, graham crackers, brown rice, popcorn, & whole wheat bread.**
- *Make sure your child is **not** being given on over abundance of starchy foods, such as **white bread products, white rice, pastas, & dairy products.** Children older than 1 year of age only need the equivalent of 12-16 ounces of dairy per day. Of course, a *few* starches are fine, so long as they are balanced with plenty of fruits, vegetables, and cereal grains.

What Else Can I Do With My Older Child Who Is Constipated?

- *If your child is actively toilet training, or trained, they should be encouraged to *spend unhurried time on the toilet after every meal*, especially breakfast, in or to establish a regular bowel movement pattern. However, do not force the child to sit on the toilet.
- *Develop a star chart to mark every successful bowel movement, and offer a reward for every 5-10 stars.

What If My Dietary Methods Fail?

- *If a consistent change in your child's diet doesn't relieve their constipation, the nurse or physician will first recommend a method of disimpaction. This may be done orally, with Milk of Magnesia or Mineral Oil, along with a natural fiber laxative such as Senna. It may also be done rectally with enemas or suppositories.
- *If this proves successful (usually after 3-7 days), it will be important to begin a maintenance method for the next 3-6 months, to allow time for your child's rectum to return to its normal size. Options for maintenance include Mineral Oil, Milk of Magnesia, Lactulose, or Sorbitol.
- *Do not use any enemas or suppositories without advice of your nurse or physician, as these methods could become habit-forming, or might even cause rectal tears or fissures with overuse.
- *Disimpaction that is unsuccessful, or only partially successful, may then force the physician to hospitalize the child for an infusion of Golytely, a safe polyethylene glycol solution which is unpalatable thus given by nasogastric tube.