Constipation

There are a number of possible causes of constipation in infants and children. Whatever the cause, once it has started, constipation can be a continuing problem. Your doctor can evaluate your child to be sure there is no medical reason for constipation and can recommend the most appropriate treatment.

What is constipation?

Constipation is difficult, uncomfortable, or infrequent bowel movements (BMs). Having BMs less than once daily can be perfectly normal, as long as they aren't too hard and aren't causing any discomfort. However, constipation is present if BMs are hard, difficult or painful to pass, or very infrequent.

Although there are many possible causes of constipation, it does not usually result from any medical condition. Making some simple changes in your child's diet (for example, more water, more fiber) can help a lot. The main risk is that constipation will become a continuing problem. Occasionally constipation signals a medical problem in need of treatment.

What does it look like?

- Infrequent, hard BMs that are difficult or uncomfortable to pass. Younger children especially may try to hold back and avoid having BMs as long as possible, which will make the problem worse.
- Straining or pain when having BMs. Sometimes bleeding occurs; you may see blood on the outside of the stool or on the toilet paper.
- Your child may have pain and/or swelling of the abdomen. Even after having a BM, your child may still feel like he or she has to go to the bathroom.
- Leakage of watery stool from the rectum. This is called encopresis. Although it may look like diarrhea, it is actually caused by stool leaking around the hard BM. This activity is not voluntary; your child is probably not even aware when it is happening.

What causes constipation?

- Most children with constipation have "functional constipation." This means that there is no medical reason for the constipation. It often begins with a painful BM or a stressful situation when having a BM. It may also be related to diet, especially not drinking enough liquids or not eating enough high-fiber foods.
- Other causes are possible:

- Medications: for example, some drugs used for mental health disorders or pain.
- Certain medical conditions, such as hypothyroidism (low thyroid hormone activity).
- Spinal nerve problems.
- Hirschsprung's disease (absence of normal nerves in the large intestine).

What are some possible complications of constipation?

- The main complication is that constipation will become an ongoing or chronic problem. If passing BMs is difficult or uncomfortable, your child may try to avoid them. This can make the problem worse.
- Other possible problems include:
 - Chronic abdominal pain ("stomach aches"), often accompanied by reduced appetite.
 - Hemorrhoids (painful outpouches of veins in and around the anal region), although these are very uncommon in a child.
 - *Encopresis*. Uncontrolled soiling. Your child soils his or her underwear without even knowing it's happening. This occurs because the rectum has become so dilated (swollen) that your child cannot even sense when watery stool is leaking around harder BM.

What puts your child at risk of constipation?

Some factors increase the risk of functional constipation:

- Stressful experiences or pain while having BMs.
- Not enough liquids or fiber in the diet.
- High stress.
- Various medical causes and diseases (such as hypothyroidism or Hirschsprung's disease).
- Certain congenital conditions (such as Down's syndrome or cystic fibrosis).

Can constipation be prevented?

- Don't make toilet training a stressful situation. If you have questions about your approach to toilet training, ask your doctor.
- Make sure your child gets a balanced, high-fiber diet, including lots of fresh fruits and vegetables and whole grains. It's also important for your child to drink enough water and other fluids.

How is constipation treated?

Correcting bowel habits.

- Most of the time, constipation in children is related to problems with bathroom habits, problems with diet, or both.
- To start correcting bowel habits, have your child sit on the toilet for 5 minutes after meals and after coming home from school. Keep track of how often BMs occur; this will help in determining how often and when your child needs to move his or her bowels.
- If constipation has been present for a while, fecal (BM)
 material may become impacted (stuck) in your child's
 rectum. The doctor may recommend or perform an enema
 (placing water through a tube in your child's rectum) to
 dislodge the stool.

Medications.

- Your doctor may recommend laxatives to relieve constipation.
- There are different kinds of laxatives. Some work by softening the stool, while others work by stimulating the bowel to produce BMs.
- In infants less than 1 year old, corn syrup (Karo syrup) may be mixed with formula. Try 1 teaspoon of corn syrup mixed in one or two bottles of formula per day; more may be needed. Other medications are available.
- For older infants and children, there are many options, including:
 - Mineral oil (usually mixed with milk).
 - Milk of Magnesia.
 - Metamucil.
- Your doctor may recommend a different medication, possibly a prescription drug.

 The goal of treatment with laxatives is to adjust the dose until the stools are soft, without producing diarrhea.
 Keep your child using laxatives for at least a few months, until healthy bowel habits are established and your child no longer worries about pain during BMs.

Diet changes.

- Your doctor may recommend some changes in your child's diet. If your child has only mild constipation, diet changes alone may be helpful.
 - Increase the amount of fiber in your child's diet. Feed your child lots of fresh fruits and vegetables and whole-grain breads and cereals; avoid white bread and processed foods. Large amounts of milk and cheese may contribute to constipation.
 - Make sure your child gets plenty of water and other liquids.

Constipation is usually the only abnormality present. It often clears up with a change in bathroom habits and diet changes. Sometimes, however, it can be a symptom of other medical problems. This is most likely if constipation occurs with other symptoms, such as weight loss or slow growth. If your child has other symptoms in addition to constipation, be sure to let the doctor know about them.

When should I call your office?

Call our office if:

- Your child continues to have difficult, infrequent BMs, despite recommended treatment.
- Your child has other symptoms, such as weight loss or slow growth.