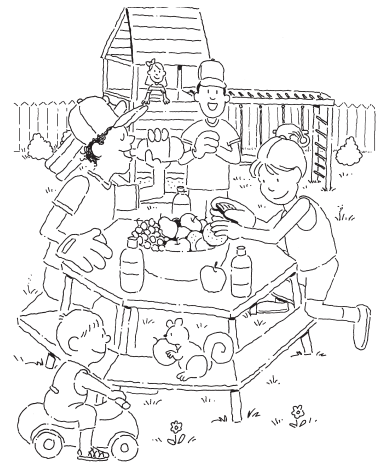


Constipation and Your Child



Bowel patterns 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 bowel movements 1 or 2 times a day. Other children may go 2 to 3 days or longer before passing a normal stool. For instance, if your child is healthy and has normal stools without discomfort or pain, having a bowel movement every 3 days may be her normal bowel pattern.

Children with constipation may have stools that are hard, dry, and difficult or painful to pass. These stools may occur daily or be less frequent. Although constipation can cause discomfort and pain, it's usually temporary and can be treated.

Constipation is a common problem in children. It's one of the main reasons children are referred to a specialist, called a pediatric gastroenterologist. Here is information from the American Academy of Pediatrics about constipation and its causes, symptoms, and treatments, as well as ways to prevent it.

What causes constipation?

Constipation frequently occurs for a variety of reasons.

- **Diet.** Changes in diet, or not enough fiber or fluid in your child's diet, can cause constipation. (See Getting enough fiber in your diet.)
- **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. Constipation may result from certain medical conditions, such as hypothyroidism (underactive thyroid gland).
- **Withholding.** Your child may withhold his stool for different reasons. He may withhold to avoid pain from passing a hard stool, which can be even more painful if your child has a bad diaper rash. Or he may be dealing with issues about independence and control—this is common between the ages of 2 and 5 years. Your child may also withhold because he simply doesn't want to take a break from play. Your older child may withhold when he's away from home, at camp, or at school, because he's embarrassed or uncomfortable using a public toilet.
- **Other changes.** In general, any changes in your child's routine, such as traveling, hot weather, or stressful situations, may affect his overall health and how his bowels function.

If constipation isn't treated, it may get worse. The longer the stool stays inside the lower intestinal tract, the larger, firmer, and drier it becomes. Then it becomes more difficult and painful to pass the stool. Your child may hold back his stool because of the pain. This creates a vicious cycle.

What are the symptoms of constipation?

Symptoms of constipation may include

- Many days without normal bowel movements
- Hard stools that are difficult or painful to pass
- Abdominal pain, such as stomachaches, cramping, or nausea
- Rectal bleeding from tears, called fissures
- Soiling (See What is encopresis?)
- Poor appetite
- Cranky behavior

You may also notice your child crossing her legs, making faces, stretching, clenching her buttocks, or twisting her body on the floor. It may look as if your child is trying to push the stool out, but instead she's trying to hold it in.

How is constipation treated?

Constipation is treated in different ways. Your child's doctor will recommend what is best for your child's situation. In some cases, your child may need to have a medical test before your child's doctor can recommend treatment. For example, your child's doctor may need to look inside your child's body

Examples of High-Fiber Foods

Food	Grams of Fiber
Fruits	
Apple with skin (medium)	3.5
Pear with skin	4.6
Peach with skin	2.1
Raspberries (1 cup)	5.1
Vegetables, Cooked	
Broccoli (1 stalk)	5.0
Carrots (1 cup)	4.6
Cauliflower (1 cup)	2.1
Beans, Cooked	
Kidney beans (½ cup)	7.4
Lima beans (½ cup)	2.6
Navy beans (½ cup)	3.1
Whole Grains, Cooked	
Whole-wheat cereal (1 cup flakes)	3.0
Whole-wheat bread (1 slice)	1.7

What is encopresis?

If your child withholds her stools, she may produce such large stools that her rectum stretches. She may no longer feel the urge to pass a stool until it is too big to be passed without the help of an enema, laxative, or other treatment. Sometimes, only liquid can pass around the stool and leaks out onto your child's underwear. The liquid stool may look like diarrhea, confusing both parent and pediatrician, but it's not. This problem is called encopresis.

and x-rays may be used to create these images. In most cases, no tests are needed.

Dietary changes

- **Babies.** Constipation is rarely a problem in younger infants. It may become a problem when your baby starts solid foods. Your child's doctor may suggest adding more water or juice to your child's diet.
- **Older children.** When a child or teen is constipated, it may be because his diet doesn't include enough high-fiber foods and water. Your child's doctor may suggest adding higher-fiber foods to your child's diet and may encourage him to drink more water. These changes in your child's diet will help get rid of abdominal pain from constipation.

Medicine

In some cases, your child's doctor may prescribe medicine to soften or remove the stool. Never give your child laxatives or enemas unless your child's doctor says it's OK; laxatives can be dangerous to children, if not used properly. 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 constipation be prevented?

Because each child's bowel patterns are different, become familiar with your child's normal bowel patterns. Make note of the usual size and consistency of her stools. This will help you and your child's doctor determine when constipation occurs and how best to treat it. If your child doesn't have normal bowel movements every few days or is uncomfortable when stools are passed, she may need help in developing proper bowel habits.

You can...

- Encourage your child to drink plenty of water and eat higher-fiber foods.
- Help your child set up a regular toileting routine.
- Encourage your child to be physically active. Exercise along with a balanced diet provides the foundation for a healthy, active life.

Getting enough fiber in your diet

The American Academy of Pediatrics recommends that people between the ages of 2 and 19 years eat a daily amount of fiber that equals their age plus 5 grams of fiber. For example, 7 grams of fiber are recommended if your child is 2 years of age (2 plus 5 grams).

Remember

If you are concerned about your child's bowel movements, talk with your child's doctor. A simple change in diet and exercise may be the answer. If not, your child's doctor can suggest a plan that works best for your child.

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.

From your doctor

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