



Constipation

Constipation is a common childhood problem. Sometimes it is easily fixed and goes away quickly. Other times constipation becomes a chronic problem, which can make a child really miserable.

What is constipation?

Constipation means having hard poops (or as we say, stools). If the stool is soft, even if very infrequent, it's not constipation. Some people have a normal, soft stool once every 2-3 days. This is not constipation. Some breast-fed babies even have a normal, loose poop just once a week; this too is not constipation.

What causes constipation?

Some people tend to get constipation, and others do not. For some people, it doesn't seem to matter what they eat. For others who are prone to constipation, what they eat can make a big difference. Americans often eat highly refined, low-fiber foods, which don't help keep the intestines working well. High fiber foods help attract water into the intestines, producing a bulky and more slippery stool which can be passed more easily.

When a stool is hard, passing it can be quite painful. When it hurts to poop, people often try to avoid pooping altogether, which just makes them more constipated, and this leads to more pain. Also, around the time of toilet training, some toddlers seem to be afraid to poop in the toilet, so they hold back. This also leads to constipation.

If this holding back continues, the hard stool can cause stomachaches. The intestinal walls can get stretched out by the hard stool, and they become weaker and less able to push out the stool, thus leading to more constipation. Often you can tell that the intestine has gotten stretched out of shape because the stools become wider and sometimes even clog the toilet. There can also be some overflow "leaking" of stool, where some liquid stool from higher up in the intestine can pass around the rocky hard stool, and leak out, which can be embarrassing. When the intestines get dilated enough, from long-standing constipation, sometimes the child loses the urge to poop. So they can poop in their pants without even knowing it, and without being able to control it. Since people don't like to talk about these kinds of things, these children think they are the only ones with this problem – but we see it a lot. Luckily, this condition is quite treatable, even though it may take a little more time and patience.

How can we treat constipation?

We usually start treatment with a medicine called Miralax (or generic versions), as well as dietary changes. Miralax usually helps within a day or two. Occasionally, if the symptoms are more severe, an enema may be necessary – just to get things started.

Once the "clean out" has occurred, we need to *keep the stools soft*. If the constipation has been very recent, then the treatment is usually brief also. If the constipation has been going on for a long time, then often the treatment needs to go on for a long time too, until the intestines have come back to their full strength. Many gastroenterologists suggest keeping the stools as soft as oatmeal or as soft as a milkshake to help the intestines regain their strength more quickly. This could mean taking medicine every day for weeks or longer. We need to evaluate your child in the office, and figure out if there is any other problem -- then we help you determine what to do.

Once the stools have been soft for a while, the intestines start to get back to a more normal size and start working better. Most of all, your child may start to forget about the previous painful experiences, and get over the habit of holding back. Sometimes if we stop the treatment too soon, the habit of holding back comes back, and the cycle of "constipation, pain, and holding back" starts all over. (continued)



When the intestines are working well again, we can move toward dietary maintenance – keeping the stools softer and easier to pass by eating the right foods and drinking enough fluids. Sometimes we need to continue medicine, too. We will work with you to come up with the best approach and adjust the treatments as your child improves.

Helpful behavioral maneuvers:

- For a baby or toddler who sometimes seems to have trouble passing a stool, some parents find that it helps to “bicycle” their legs – rotating their legs as if they are riding a bicycle, helping to move gas and to relax tense muscles.
- For small children, use a potty that sits on the floor – low enough so that the child can put his feet squarely on the floor. This makes it easier for him to use the right muscles to help push his stool in the right direction!
- For older, toilet-trained children, it is a good idea to “toilet-sit” each day. The best time is usually about 10 minutes after a meal, after breakfast or dinner. Just sitting on the toilet for 5-10 minutes at the time when the colon is likely to start reflexively squeezing can help a child succeed. Also, young children often respond well to positive reinforcement (such as stickers, books, gifts from a dollar store, or hugs and kisses) for each time they sit on the toilet.
- Children can become afraid of painful poops. Anything you can do to reassure them is helpful. Let them watch parents, friends, or even characters in books or videos have poops which don't hurt, just as you may have done during potty training. Even though it is quite frustrating to watch your child hold in a poop when you know he needs to get it out, please hide any frustration or anger about it. Don't punish him if he has an accident.

Helpful dietary changes:

- High-fiber foods—Barley or oatmeal has more fiber than rice cereal. Other high-fiber fruits and vegetables (or purées) include: prunes, figs, apricots, pears, peaches, plums, beans, peas, broccoli, and spinach. Older children can get fiber from high fiber cereals, whole grain breads or brown rice, most fruit (not bananas), dried fruit (just brush teeth well!), beans, lentils, corn, peas, popcorn, and most vegetables (not potatoes).
- Olive oil or flaxseed oil can be added to vegetables, pancakes, and other foods.
- Ground flax seed can be mixed with oatmeal, purees or pancake batter – you can barely taste it and it boosts the fiber a lot. And it's a great source of omega-3 fatty acids!
- Fruit juice, for 4 months old and above: Some fruit juices – including apple, prune, apricot, or pear – may help. Prune juice is particularly effective, and you can combine it with other foods or dilute it if it tastes too strong. You can use up to about 4 oz per day. Remember that fruit juice is mostly sugar, so only use it as long as you need it for constipation.
- Plenty of water is most important. It helps fiber work to prevent constipation, by making the stools more moist. And fiber without water can produce gas and cramping.
- *Avoid constipating foods.* For many people, foods to avoid may include bananas, apples, cheese, and refined grains, such as white rice, white bread, pasta, tortilla, and crackers.