

DEFINITION

- Painful passage of stools: The most reliable sign of constipation is discomfort with the passage of a bowel movement.
- Inability to pass stools: These children feel a desperate urge to have a bowel movement (BM), have discomfort in the anal area, but are unable to pass a BM after straining and pushing for more than 10 minutes.
- Infrequent movements: Going 3 or more days without a BM can be considered constipation, even though this may cause no pain in some children and even be normal for a few. (*Exception:* After the second month or so of life, many breast-fed babies pass normal, large, soft BMs at infrequent intervals [up to 7 days is not abnormal] without pain.)

Common Misconceptions in Defining Constipation

Large or hard BMs unaccompanied by any of the conditions just described are usually normal variations in BMs. Some normal people have hard BMs daily without any pain. Children who eat large quantities of food pass extremely large BMs. Babies less than 6 months of age commonly grunt, push, strain, draw up the legs, and become flushed in the face during passage of BMs. However, they don't cry. These behaviors are normal and should remind us that it is difficult to have a BM while lying down.

Causes

Constipation is often due to a diet that does not include enough fiber. Drinking or eating too many milk products can cause constipation. It's also caused by repeatedly waiting too long to go to the bathroom. If constipation begins during toilet training, usually the parent is applying too much pressure.

Expected Course

Changes in the diet usually relieve constipation. After your child is better, be sure to keep her on a nonconstipating diet so that it doesn't happen again.

Sometimes the trauma to the anal canal during constipation causes an anal fissure (a small tear). This is confirmed by finding small amounts of bright red blood on the toilet tissue or the stool surface.

HOME CARE

Diet Treatment for Infants (Less than 1 Year Old)

- If your baby is under 2 months of age, try 1 teaspoon of dark Karo syrup twice a day.
- If over 2 months old, give fruit juices (such as apple or prune juice) twice each day.
- If over 4 months old, add strained foods with a high fiber content, such as cereals, apricots, prunes,

peaches, pears, plums, beans, peas, or spinach twice daily.

- Strained bananas and apples are neither helpful nor constipating.

Diet Treatment for Older Children (More than 1 Year Old)

- Make sure that your child eats fruits or vegetables at least three times each day (raw unpeeled fruits and vegetables are best). Some examples are prunes, figs, dates, raisins, peaches, pears, apricots, beans, celery, peas, cauliflower, broccoli, and cabbage. (*Warning:* Avoid any foods your child can't chew easily.)
- Increase bran. Bran is an excellent natural stool softener because it has a high fiber content. Make sure that your child's daily diet includes a source of bran, such as one of the new "natural" cereals, unmilled bran, bran flakes, bran muffins, shredded wheat, graham crackers, oatmeal, high-fiber cookies, brown rice, or whole wheat bread. Popcorn is one of the best high-fiber foods for children over 4 years old.
- Decrease consumption of constipating foods, such as milk, ice cream, yogurt, cheese, and cooked carrots.
- Increase the amount of fruit juices your child drinks. (*Exception:* Orange juice is not as helpful as others.)

Sitting on the Toilet (Children Who Are Toilet Trained). Encourage your child to establish a regular bowel pattern by sitting on the toilet for 10 minutes after meals, especially breakfast. Some children and adults repeatedly get blocked up if they don't do this. If your child is resisting toilet training by holding back, stop the toilet training for a while and put her back in diapers or Pull-ups.

Stool Softeners. If a change in diet doesn't relieve the constipation, give your child a stool softener with dinner every night for 1 week. Stool softeners are not habit forming. They work 8 to 12 hours after they are taken. Examples of stool softeners that you can buy at your drug store without a prescription are Haley's M-O (1 tablespoon), Metamucil or Citrucel (1 tablespoon), or plain mineral oil (1 tablespoon).

Measures for Acute Rectal Pain. If your child has acute rectal pain needing immediate relief, one of the following will usually provide quick relief: sitting in a warm bath to relax the anal sphincter, a glycerine suppository, gentle rectal stimulation for 10 seconds using a thermometer, or a gentle rectal dilation with a lubricated finger (covered with plastic wrap).



CALL OUR OFFICE

IMMEDIATELY for advice about an enema if

- Your child develops severe rectal or abdominal pain.

During regular hours if

- Your child does not have a bowel movement after 3 days on this nonconstipating diet.
- You have other concerns or questions.