

# Paediatric Continence

St George's Healthcare NHS Trust,  
London SW17 0QT

# What is Constipation?

- **CONSTIPATION** – is when there is a difficulty or delay in passing stools. It is not a description of the hardness of the stool contrary to belief.
- **Soiling** – is the involuntary passage of fluid or semi solid stool into the clothing – usually as a result of overflow from a faecally loaded rectum
- **Encopresis** – is passage of a normal stool into socially inappropriate places – including clothing

# Management of constipation in children

- All of the information that will be in this talk will be relevant to our work at St. George's Hospital.

# Initial Assessment

- The child will be referred normally by the G.P. or other Health Professional.
- A good history is critical and always ensure that the family understand what you are talking about I.E. correct jargon and if English not the first Language an interpreter is essential.

# Signs & Symptoms of Childhood Constipation


The child may have one or a combination of the following:

- Poor appetite
- Lack of energy
- Unhappy/angry/irritable
- Irregular bowel activity
- Passing occasional enormous stools
- Soiling
- Foul smelling wind and stools
- Irregular stool texture
- Withholding or straining to stop the passage of stools
- Pain on defaecation
- Passage of blood on defaecation

# Consumption of foods and fluids which should be reduced

- Bananas
- White bread
- Full fat milk

# Consumption of foods and fluids which should be encouraged

- Brown, granary or wholemeal bread.
- Cereals such as Weetabix, Ready Brek, Frosted Wheats, Shreddies, Raisin Wheats, Puffed Wheat.
- Wholemeal Pasta, Brown Rice.
- Baked Beans and Sweetcorn.
- All Fruit - Leave Skins on where possible.
- All Vegetables – peas, carrots, beans, cabbage, cauliflower, jacket potato and chips with skins left on.
- Biscuits – Digestive, Fig Rolls, HobNobs.
- Coconut water
-  **Fluid intake should be increased according to the age of the child; water based drinks where possible.**

# American Dietary Recommendations

- Infants 0 - 6 months 700ml
- 7 - 12 months 800ml
- 1 - 3 years 900ml
- 4 - 8 years 1200ml

These are for **adequate** fluid intakes do not  
Include water from foods.

From NICE guidelines May 2010

**CONSTIPATION IN CHILDREN AND YOUNG  
PEOPLE**



# Toilet Position

## Bristol Stool Chart

# choose your **POO!**

THE BRISTOL STOOL FORM SCALE (for children)

type **1**



looks like:

**rabbit droppings**

Separate hard lumps, like nuts (hard to pass)

type **2**



looks like:

**bunch of grapes**

Sausage-shaped but lumpy

type **3**



looks like:

**corn on cob**

Like a sausage but with cracks on its surface

type **4**



looks like:

**sausage**

Like a sausage or snake, smooth and soft

type **5**



looks like:

**chicken nuggets**

Soft blobs with clear-cut edges (passed easily)

type **6**



looks like:

**porridge**

Fluffy pieces with ragged edges, a mushy stool

type **7**



looks like:

**gravy**

Watery, no solid pieces  
ENTIRELY LIQUID

# Schools, Toilets

- Support essential
- Privacy
- Dignity

# Medication

- Oral Laxatives
  - Sodium Pico Sulphate Suspension
  - Senna
  - Docusate Capsules
  - Dulcolax Perles
  - ExLax (chocolate)
  - Movicol Paediatric Plain
- \* Lactulose is a softener not a laxative
- Enemas
- Clear Out
- Worse before it gets better!

# Retraining

- Psychology
- Support
- Availability

# Enemas

- Micralax
- Relaxit
- Bisacodyl
- Irry pump (Braun)
- Peristeen (usually for sb patients )Coloplast

# Surgery

- ACE, Malone, MACE
  - Proximal

# Members of the MDT

- Dr Sally Mitton Paediatric Gastroenterologist
- Dr Thankum Paul Paediatric Gastroenterologist
- Dr Gillian Colville Consultant Child Psychologist
- Sue Affleck CNS (team leader)
- Rebecca Martin CNS
- Paediatric Dieticians
- CCC – four patients per month



# Case Study

- MT – Aged 6, Girl
- Attended GP on 26 separate occasions
- Attended A&E on 4 occasions
- Always complaining of soiling and constipation
- Referred to Dr Mitton, admitted for clearout which took a week
- Sodium Picosulphate 20ml daily
- Movicol PP 2 sachets BD for 1 year
- Discharged after 18months

‘For the child it is hard to imagine a social or physical problem which is more devastating to his sense of self worth and dignity than an inability to control the most basic of human functions. A child who soils lives in constant fear that he may lose control and that at any moment he will be exposed to the fury of his parent or taunts of his peers’

Buchanan (1992)

Sue Affleck

Clinical Nurse Specialist

St Georges Healthcare NHS Trust

0208 725 2272