Constipation: Frequently Asked Questions

By the time a child has symptoms, diet changes alone will not make constipation better. Managing constipation in children takes diet changes, medicines and time.

Why is my child constipated?

There are many reasons why children become constipated. Most common reasons are:

- Eating foods that are constipating
- Not drinking enough liquid
- Holding on to stool when it is not a comfortable or convenient time to go
- Being afraid to have a painful stool

Every child’s bowel function is different.

My child stools every day. How could they be constipated?

How often your child stools is not as important as how much comes out. The goal is to get out a large amount of stool. Also, if there is a lot of stool that has been building up in the colon, it can take some time to get all of that cleaned out.

My child sometimes has diarrhea or loose stools. How could they be constipated?

When there is a large amount of stool in the colon, it is not uncommon to have looser stool from higher up in the colon leak around the hard stool below it. Sometimes this leaks into their underwear. It is called overflow stool. Often this stool is dark in color and has a very strong odor. Some children seem to alternate between hard stools and diarrhea.

What kind of changes to my child’s diet would help with this?

- **Drink more liquids.** Start with having them drink more liquids each day. Drink enough to keep their urine pale or clear. Dark yellow urine is too concentrated and means you need more liquids. (Eating multi-vitamins can cause urine to be dark yellow, too.)

- **Add more fiber.** Changing to whole grains is a great place to start. Eating 5 servings of fruit or vegetables daily will also give your child needed fiber. One serving equals about ½ cup. Just a few foods are found to make constipation worse and those include cheese and excessive dairy products, bananas and, for some children, apples. Processed grains such as white flour and white rice can also add to constipation.

- **Limit dairy products.** While you don’t have to avoid them completely, limit dairy products to 2 to 3 servings per day and other constipating foods to an occasional treat.

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To Learn More
- Gastroenterology 206-987-2521
- Urology 206-987-2509
- Ask your child’s healthcare provider
- seattlechildrens.org

Free Interpreter Services
- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.
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| Do we need to use medicines to treat this?                              | Drinking enough liquid and eating more fiber are very helpful, but by the time your child is showing symptoms of constipation, diet changes alone are not enough to make this better. Two types of medicines are used to help: stool softeners and laxatives.  
**Stool softeners** work by pulling water from the body into the stool to make it soft enough to pass easily. They have been well studied and proven to be a safe, effective way to get your child's colon back to working well.  
**Stimulant laxatives** move the hard stool out of the colon. They help increase the strength of the colon muscle contraction and are sometimes needed initially.  
Use these medicines only if recommend by your healthcare provider. |
| How do you know that there is not something bad that is causing this?   | This is a very common concern among parents and children dealing with constipation, especially when it is quite painful. When large amounts of stool or gas pass through the colon, it stretches the colon, causing the pain, but rarely is it caused by an underlying problem. Your primary care provider (PCP) can perform some basic testing such as X-rays and blood tests to be sure. |
| What about food allergies?                                              | Specific food allergies don't cause constipation. We will talk with you to rule out gluten or lactose sensitivities.                                                                                         |
| Is there a blockage in my child's intestine that is causing this?       | Fortunately, it is very rare to have constipation caused by a blockage like a tumor. Generally, the trapped stool itself is causing the blockage. Therefore, the stool needs to be passed to release the blockage. |
| How long will my child have to take medicines?                         | The stool softener often needs to be continued for a minimum of 6 to 12 months until the bowel muscles and nerves work better. Some children will need to continue the medicines for longer, particularly if they are still potty training or are withholding the stool. |
| Is it safe to use these medicines for so long?                         | Most of the medicines that we use, such as Miralax, have been tested and have been found to be safe to use for many years. Some medicines, such as Senna or Bisacodyl, should only be used for 2 months at a time and then given a break.  
Check with your doctor first before giving any type of medicine to your child. |
| Why can't we stop medicines as soon as my child is going better?       | The colon has to empty daily long enough for it to shrink back to a normal size and for its tone to return to normal. This process takes months longer than it takes for the symptoms to improve. |
How do I help my child if they are afraid to go because it hurts? It is important to begin by softening your child’s stools to decrease the pain. Sometimes, they need to pass the hard stool to begin the cleanout. Warm baths, deep breathing, and sitting in the correct position can make this easier. If your child continues to have a lot of fear with stooling even after the stools are softened, he or she may need to work with a therapist who specializes in these fears.

My child is not yet potty trained. Should we start? In general, it is best to wait to potty train until the constipation has improved. It is important to never force your child to sit on the toilet or to potty train.

Should we do tests to make sure there isn’t something wrong? Most times, tests are not needed. Constipation is a very common problem among children. In some cases, we do recommend some tests like X-rays and blood tests to rule out any problems that could be causing this. We will send that information to your child’s PCP so that he or she can talk with you about those tests.

My child has been taking medicines for this for a long time. Why isn’t this working? Medicines will not be effective if your child is not cleaned out first and then continued consistently on the correct maintenance doses. Be sure you are giving the maintenance medicines every day. If these things have already been done and your child is still having difficulties, your PCP may need to do some tests.

My child completed a cleanout but nothing much happened. Why didn’t it work? Since constipation has been developing over a period of months to years it often doesn’t get better quickly. It can take many rounds of cleanout before the colon is completely empty. The colon can’t start working better until it is empty, so just keep repeating cleanouts until a very large amount of stool is passed and there is no stomach pain or soiling.