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Stool Soiling and Constipation in Children

What are the causes of stool soiling?

Stool soiling (messing the underwear with stool) most often occurs because of constipation. In a few children, stool soiling is caused by a disease or a birth defect. Stool soiling affects about 2% of children.

When stool soiling is caused by constipation, it's called encopresis. In children with encopresis, formed, soft or liquid stools that often have a very bad smell leak from the anus (the outside opening to the rectum) around a mass of stool that is stuck in the lower bowel. The consistency of the stools found in the underwear is usually loose and sort of runny or like clay. Most often, the amount of soiling in children with constipation is small and just stains the underwear.

Stool soiling is involuntary--your child does not mean to soil his or her pants. Soiling can occur just sometimes, or it can occur once a day or many times a day.

How are stool soiling and constipation related?

Children who have problems with constipation may have stool soiling. They also may have painful bowel movements, or they may have incomplete emptying of stool. Sometimes they may have only 3 bowel movements a week. Some constipated children have daily bowel movements, but they pass only small amounts of stool. Once in a while, they have a very large bowel movement, sometimes large enough to clog the toilet. In children who have incomplete emptying of stool, the amount of stool left in the rectum becomes so large that stool leaks out of the anus and produces stool soiling.

What causes constipation in a child?

Constipation may occur if your child is not eating enough high-fiber foods, drinking enough fluids or getting enough exercise. But in many children, no cause for the constipation can be found. Having a bowel movement may have been so painful that the child began resisting the urge to have a bowel movement. Not having a bowel movement when the urge occurs can lead to constipation. Your child could be scared of being alone in the bathroom or scared of the toilet. Some children just don't want to stop playing to go to the bathroom.

An illness that leads to poor food intake, physical inactivity or fever can also result in constipation and stool soiling that remain a problem after the illness goes away.

Symptoms of constipation are extreme straining during a bowel movement, abdominal pain and bloating, crankiness, tiredness, loss of appetite between bowel movements, wetting during the day or night, and extreme reluctance to use the toilet.

Is this just a phase?

It's possible that your child is going through "a phase." Your child may not have the skills yet to use the toilet. But, if your child keeps soiling after about 3 months of being able to use the toilet to urinate, it's probably time for him or her to learn to use the toilet for bowel movements. If other daily routines, such as getting dressed, picking up toys or going to bed, are a problem, it may be best to get help for those problems before you try toilet training. Your doctor can offer advice and tell you who to call for help.

How should I start toilet training my child for bowel movements?

1. Make a toilet diary.

Keep a "diary" showing when, where and what kind of bowel movements your child has. It will help you and your doctor see patterns in your child's bathroom habits. Try to keep a toilet diary for at least 1 week before going on to step 2. If your child is

in day care, ask the teacher to help you look for patterns in your child's toilet behavior. At the end of this handout there's a sample toilet diary you can use to help you.

2. Teach your child to sit on the toilet.

At first, you and your child can play in the bathroom to show that the bathroom is not a bad place. After a few weeks, your child should start sitting on the toilet (with pants on) for a few minutes at a time. Your child may need a foot stool and favorite books, dolls or small toys during bathroom time.

Read to, play with and talk to your child when you're in the bathroom together. Don't expect--or ask--your child to have a bowel movement on the toilet yet. Remember, he or she is still getting used to the idea of sitting on a toilet. Start with a very short amount of time (about 30 seconds) and slowly work up to 5 minutes. A kitchen timer can be the signal for the end of "bathroom fun." Move to step 3 once your child is sitting on the toilet 3 to 5 times a day, for 5 minutes each time.

3. Make sure your child's bowel movements are soft and well-formed.

It helps if you give your child less dairy food and more high-fiber foods. If your doctor says it's OK, you may be able to give your child fiber supplements or laxatives for a short time. Ask your family doctor about diet changes.

At first, your child may have more soiling accidents. Have your child help clean up messes, but don't yell or punish your child for soiling. Being angry with your child when he or she soils only makes toilet training harder. Try to stay calm and relaxed when your child soils, so he or she won't feel bad.

4. Have set times for sitting on the toilet.

Once your child is having healthy bowel movements and is used to sitting on the toilet, start having him or her sit on the toilet at regular times during the day. Time the sits to start about 10 to 20 minutes after each meal and during times when your child usually has a bowel movement. You'll be able to tell these times from the toileting diary. Your child should sit on the toilet at least 3 to 5 times per day, for about 5 minutes each time.

5. Reward bowel movements in the toilet.

The first time your child has a bowel movement in the toilet, give him or her a reward. Good rewards are stars on a chart or fun activities. At first, give a reward after every bowel movement in the toilet. Later, give the reward after every few bowel movements. Pretty soon your child will be trained. Then you can stop giving rewards.

Next, teach your child to know when it's time to go to the toilet. Teach your child to tell you, instead of waiting for you to ask. Young children should tell a parent before they use the bathroom, in case they need help.

What is the treatment for stool soiling due to constipation?

If your child doesn't have a bowel movement for 3 or 4 days in a row, you should call your doctor. He or she will probably want to remove the stool that has collected in the lower bowel. Your doctor can do this in the office by giving your child an enema or a suppository. It is also possible that your doctor may have you give your child high doses of laxatives to remove the stool.

After the stool has been removed, it is important to be sure that your child can have bowel movements easily. Easy bowel movements will help prevent another large collection of stool. Treatment may include changing your child's diet to include more fluids and fiber-rich foods, having your child sit on the toilet several times a day and giving your child laxatives every day to help soften the stools.

What laxatives should my child take?

Your doctor can tell you which laxatives to use and how much to give your child. The most commonly used laxatives are milk of magnesia, mineral oil and sorbitol. During the retraining period, a laxative must be given every day to get your child's body into a routine. If your child's stools are too loose, you can reduce the amount of laxative, but keep giving your child the laxative every day. Some laxatives taste better if they are mixed with orange juice, chocolate milk or other drinks.

Toileting Diary

Child's name:

Day/date	Time	Time	Time	Time	Time	Time	Time	Time
Mon/22	9 a.m. BMB, UB	12 noon PS, UT	2 p.m. BMP, UP					

BMT=bowel movement in toilet
 BMP=bowel movement in pants
 BMB=bowel movement in bed
 PS=practice sits

UT=urinates in toilet
 UP=urinates in pants
 UB=urinates in bed

Directions: When your child has a bowel movement or urinates:

1. Put day of week and date in the first column.
2. Put time of day in "Time" column.
3. Add the code to the "Time" column.
4. Continue each day.