ERIC's Guide To Children's Bowel Problems





Choose your:









Looks like: Rabbit Droppings

Separate hard lumps. Like nuts (hard to pass)





Looks like: Bunch of Grapes Sausage-shaped, but lumpy





Looks like: Corn on the Cob

Like a sausage but cracked on the surface





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

The most common bowel problem in children is constipation. Left untreated, or treated too gently, this can lead to soiling. Keep a check on your child's poo – it should be Type 4 - soft and easy to pass.

How often should a child poo?

At least 4 times a week. Any less than this and the journey from mouth to bottom is taking too long – too much water is then absorbed and hard poo results – look overleaf. MORE than 3 times a day is not right either – it could look like Type 7. That might be diarrhoea but it could also be overflow caused by constipation!

What age can constipation start?

ANY age! Even babies can get constipated! Including those who are breast fed! Never wait for it to get better by itself...the longer it is left untreated the longer it takes to get better.



Concept by Professor DCA Candy and Emma Davey, based on the Bristol Stool Form Scale produced by Dr KW Heaton, Reader in Medicine at the University of Bristol

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How to get the Pcc in the loo!

Children who have had poo problems often have trouble recognising when they need to sit on the toilet. It is important to get a really good

routine in place.

Make sure feet are firmly supported flat on a box or stool. Knees should be above hips with a secure sitting position - you may need a children's toilet seat.

Sit on the toilet 20-30 minutes after each meal and before bed. This makes the most of the natural squeeze we get after eating, and makes sure we don't go to bed full of poo.



We need to relax to let the poo out...so that means distraction with toys, games and books. Keep them ready beside the toilet, so it's easy to sit for 5-10 minutes.



OTHER THINGS THAT MIGHT HELP:

- Rock forwards and backwards on the toilet
- Massage the tummy ideally in clockwise circles
- Laughing/coughing/blowing to help push down with the tummy muscles. Try blowing bubbles.... then it's fun too!

REMINDER FOR PARENTS!

Give lots of praise for sitting on the toilet regularly. Reward the sitting and trying rather than the pooing itself - that may be an unachievable goal. Your child won't poo every time!

Don't be surprised if it takes lots of practise to get the poo in the loo...but it will be worth all the hard work!



For information and support on bedwetting, daytime wetting, constipation and soiling and potty training call ERIC's Helpline on 0845 370 8008

Email helpline@eric.org.uk

Website www.eric.org.uk

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This leaflet has been produced with the support of an educational grant, provided by Stirling Anglian Pharmaceuticals.



NICE guidelines: Constipation in children and young people http://www.nice.org.uk/cg99

If your child is of school age, they may well need some help in school. Read this leaflet so you know how to ask for help – you'll find it on the ERIC website www.eric.org.uk/Campaigns/TheRightToGo







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How does our food turn into Pco?

So what can go wrong?

The poo in the large bowel should move along every time the gut muscles squeeze - a bit like a conveyor belt moving and pausing and moving again.

When it reaches the rectum, the lowest part of the bowel, a message goes up to the brain saying we need a poo.

Sometimes we don't want to listen to that message, maybe because we don't like using the toilet when we're out, or maybe because our poo is hard and difficult to pass.



That's when we get a poo traffic jam!

Poo builds up in the large bowel, and the longer it stays there the more water is absorbed out of it...so the harder it gets and the more it gets STUCK!!



The messages telling us we need a poo are sent when the rectum stretches. If the poo stays there, it stays stretched, so no new messages are sent. This means we have no idea we need a poo!

So it's no good waiting for a signal before we go and sit on the toilet-we have to have a regular routine of sitting on the toilet and trying - see "How to get the poo in the loo" overleaf.

The conveyor belt keeps on moving... so more liquidy poo from higher up can leak around the lumps of poo and might even leak out of your bottom! This is what we call soiling or overflow. It might be so runny you think you've got diarrhoea (Type 7 on the poo chart), or it might be little hard bits (Type 1 on the poo chart), or both! And it might be really stinky - people say the older the poo, the smellier it is.



What can we do to make it better?

Don't worry - LOTS of children have poo problems - we're just a bit shy about talking about

See your GP - he or she will just check there isn't any underlying problem causing the constipation. He/she will also prescribe some medicine to help you poo - probably one called a macrogol as it says in the NICE Guidelines for children with constipation.

First of all you may need to have LOTS of medicine to clear out the poo traffic jam! You'll know when it's all gone - when you are pooing brown water! Then you'll need to continue taking a smaller dose every day to keep your poo soft while you teach your bowel to empty every day.

Drinking plenty, eating lots of different foods including fruit and vegetables and running round a lot will all help keep you healthy AND keep the poo moving along the conveyor belt.



Next stop is your small bowel which is where all the nutrients (that's the good stuff) are taken out to be used by the rest of your body.

The waste liquid
(watery poo) then heads
on down to the large bowel
where there are strong muscles
which squeeze the poo along. As it
travels along, water is soaked up
by your body and the poo soup is
turned into a nice, smooth
sausage shaped poo
ready for you to pop
out into the loo.