

Patient information from BMJ

Last published: Sep 14, 2022

Constipation in children

Most children get constipated from time to time. But children who have constipation that doesn't go away may need treatment to get back to normal.

What happens if my child is constipated?

If your child is constipated they don't pass a stool ('poo') often enough. And, when your child does go, it hurts because the stools are hard and dry. Most children with constipation don't have anything physically wrong with them. Usually they've just got into the habit of not going very often.

Common reasons that children become constipated include:

- They've found passing a stool painful before
- They find toilet training stressful
- They don't like using toilets outside their home, such as at school or nursery
- They don't have enough fibre in their diet
- Emotional problems.

What are the symptoms?

There aren't any rules about how often your child should pass a stool. Every child is different.

For example, young babies may pass stool many times a day, especially if they are breastfed. By the time children are 3 or 4 years old they may pass stool between 3 or 4 times a week and 3 or 4 times a day.

But if your child passes a stool twice a week or less, and finds it painful, it's a sign that they could be constipated, especially if they also have some of these symptoms:

- Pain when passing stools
- Soiling of underwear or clothes (this is called overflow faecal incontinence)
- Small, dry, and hard stools like pellets. When these collect in the rectum and anus and don't come out easily, this is called faecal impaction
- Avoiding going to the toilet.

What treatments work?

Usually constipation lasts a few days and clears up without any treatment. But in some children it doesn't go away. If you're worried about your child's constipation, see your doctor. The problem can get worse if you wait. Treatments can help, but it can take a while for them to work.

Things you can do for your child

Giving your child food with lots of fibre is likely to help with constipation. Your child is likely to have more bowel movements and less pain in their abdomen.

Here are some ways to help your child get more fibre:

- If they eat breakfast cereals, make sure they're whole grain
- Give them fruit, such as apples, instead of fruit juice
- Give them brown rice and whole-grain bread and pasta instead of the white kinds
- Encourage them to eat high-fibre snacks, such as raw carrots.

Your doctor may also recommend these steps to help keep your child's bowels healthy:

- Encourage your child to go to the toilet when they first get the urge, rather than to wait
- Set aside enough time for your child to sit on the toilet without feeling rushed
- Make sure your child gets lots of active play
- Make sure your child sits properly on the toilet and try to get them to relax
- If your child says that it hurts to 'poo', tell him or her to stop, and to try again later.

Medicines

If extra fibre hasn't worked your doctor may recommend a laxative. There are several types. Research has found that laxatives that make stools softer can help. Doctors call these **osmotic laxatives** and they will probably help your child pass a stool more often.

Your child is likely to have more frequent bowel movements and feel less pain. This type of laxative is also used if a child's bowels get completely blocked with large, hard stools (known as **impacted faeces**).

You can buy some of these laxatives from a pharmacy without a prescription. But if your child has ongoing constipation it's best to see your doctor before using this treatment. Some over-the-counter medicines have age restrictions. Check with your pharmacist to make sure they're suitable for your child.

There are other types of laxative, but we don't know as much about how well they work for children who have constipation.

Laxatives can have side effects. But usually these aren't serious. Your child may feel thirsty or get stomach cramps, wind (flatulence), belching, bloating, nausea, or mild diarrhoea. Your child may get fewer side effects from a laxative that makes stools softer.

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Non-drug treatments

For slightly older children (probably those at least 18 months old) there are some treatments that can help them understand and change their toilet habits.

Toilet training for children with constipation means teaching your child which muscles to relax and tighten when having a bowel movement, so that it's easier to pass stools. Your child might be taught to sit on a toilet, relax their legs and feet, take a deep breath while sitting up straight, then push down while still holding their breath and pulling in their stomach muscles to help push stools out.

You could also try having regular toilet times that are calm and unhurried, such as after breakfast or before bedtime.

You can use a diary to record your child's eating habits and when they pass stools. You might write down when your child eats an apple or sits on the toilet, for example. You can use this as part of a reward system. The child gets a reward for habits that might help them stay regular.

There's not much good-quality research to show if these treatments can help if they are used on their own. But doctors sometimes suggest toilet training in addition to laxatives.

What will happen to my child?

Most children get constipation from time to time. Usually it lasts just a few days. But for some children the constipation doesn't get better. If it's not treated properly it can get worse.

Your child is more likely to get better if the constipation is treated early. Your child is more likely to get long-lasting constipation if they are constipated while very young and if constipation is common in your family.

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