

Constipation

- Symptoms
 - ≤ 2 defecations / week
 - Hard, painful bowel movements
 - [Bristol Stool Scale](#)
 - Large diameter stools
 - May have overflow incontinence and soiling
 - Abdominal cramps, esp after eating (gastrocolic reflex)
- Physical exam
 - May palpate hard stool mass in lower abdomen
 - Anal fissure
- Imaging *not* generally required
 - 5-7x the radiation dose of a CXR
- Dietary - Infants
 - < 4 months: add 1oz water *after* usual full milk feed
 - Consider formula change
 - Constipation sometimes appears with transition to cow's milk
 - > 4 months: prune, apple, pear juice 2-4 oz per day
- Dietary - Older child
 - High fiber foods: fruits (not bananas), bran flakes mixed with other cereal if needed to increase acceptance, sweet potato, carrots, popcorn
 - Whole grains: whole wheat bread, brown rice
 - Beans
 - Ensure adequate fluid intake

Constipation - Medications

*Preference
not using
suppositories
to avoid
“dependence”
on their use

Laxatives

- PEG 3350 (Miralax, other brands) – 17gm/capful
 - 0.4-0.8 gm/kg/day (max 17gm) initially, mix in 8oz fluid of choice
 - May need to give BID-TID initially to “clean out” residual stool
 - Don’t give and then send to school
- Lactulose 70% 1-2mL/kg (max 60mL/day) qD-BID
- Milk of Magnesia 1-11yo: 1-3mL/kg/day (max 30mL), 12yo+: 60mL/day
- Mineral oil: 1yo+ 1-2mL/kg/day (max 45mL)

If impacted, may require Pediatric Fleet Enema initially
 2-4yo: 29mL (1/2 Pediatric Fleet enema)
 5-11yo: 59mL (1 Pediatric Fleet enema)
 12yo+: 118mL (1 Adult Fleet enema)

Stimulant Laxatives

- Senna Syrup 8.8mg/5mL or 8.6mg/tab
 - 2-6yo: 2.5-3.75mL qD-BID
 - 5-12yo: 5-7.5mL (1-2 tabs) qD-BID
 - >12yo: 5-15mL (1-3 tabs) qD-BID
- Bisacodyl (Dulcolax, other brands)
 - Oral tablets 5mg, must swallow whole
 - 3-9yo: 1 tab daily
 - 10-11yo: 1-2 tabs daily
 - 12yo+: 1-3 tabs daily
 - Suppository* 10mg
 - 2-9yo: ½ suppository daily
 - 10yo+: ½ - 1 suppository daily
- Glycerin suppository*
 - 2-5yo: 1 pediatric suppository daily
 - 6yo+: 1 adult suppository daily

Constipation Tips

- “Infant dyschezia” = straining, crying, turning red in the face, with ultimate passage of normal soft stool \neq constipation
 - I tell parents to imagine what it’s like pooping while laying flat on your back
- Exclusively breastfed babies may reduce the frequency of their stools to as few as once per week
- Babies that transition from breastfed to formula-fed will have fewer, pastier, smellier stools
- Transition to solids or cow’s milk is a common time for constipation to develop – ensure adequate fluids and fiber
- Toilet training can result in stool withholding
 - Treat constipation with laxatives and fiber until stooling is pain-free
 - Try timed sittings, star charts / rewards, low-pressure training
- Transition to school can result in stool withholding / not wanting to use the public bathroom