

Constipation and Fecal Soiling

Fecal soiling is the leakage of stool that a child cannot control. This is common and usually happens because the child is constipated and has a large amount of stool in his colon. This is called encopresis (en co PREE sis). Encopresis is not caused by a disease. For most children with encopresis, it has been a problem since the toilet training period.

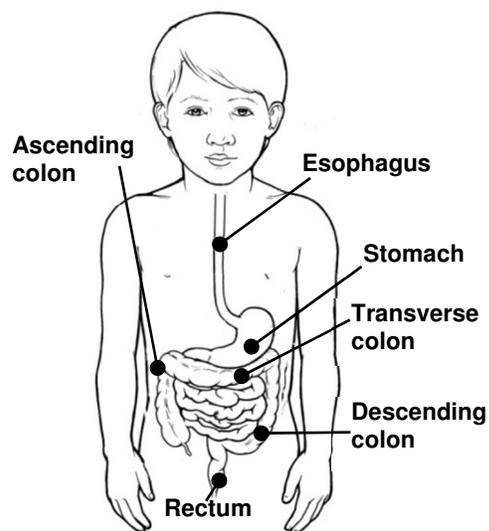
The GI System

To understand encopresis, it helps to know how the gastrointestinal (GI) system works.

The main purpose of the GI system is to digest and absorb food so energy is supplied to the body and growth takes place (Picture 1). Food is digested and the nutrients from it go to all parts of the body. Food not used by the body passes through the small intestine in liquid form. In the colon, it becomes formed stool. The colon absorbs water back into the body and forms stool from the unused food.

When stool passes into the rectum (the last part of the colon) the internal rectal sphincter relaxes (Picture 2). At this time, the child becomes aware of the need to have a bowel movement (BM). He then has two choices. He can choose to go to the bathroom. Or he can pull in (contract) the external anal sphincter and not have a bowel movement.

When a child does not have a BM regularly, more and more stool builds up. This fills up and distends (stretches) the anal canal (Picture 3). When the nerves and muscles get stretched the child loses the ability to sense that he needs to have a BM. He does not protect himself by going to the bathroom or by contracting the anal sphincter. So, stool comes out and he soils his underwear. At other times, liquid stool can trickle down around the mass of stool in the rectum and seep out. It may seem as if the child has diarrhea.



Picture 1 The normal gastrointestinal system inside the body.



Picture 2 The normal anal canal.



Picture 3 The distended (stretched) anal canal.

Continued on page 2

The GI System, continued

The soiling is automatic and usually takes the child by surprise. Soiling may show up as streaks in the child's underwear. The child has no control over it. He does not do it on purpose. These stools are often very foul-smelling. The child gets used to this odor and may not be bothered by it.

The child with encopresis should be treated with kindness and understanding. Punishment and ridicule will only make matters worse. Any child who has suffered with encopresis for a long time may develop emotional problems. These problems may make the child less willing or able to follow medical advice. Psychological counseling, along with medical treatment, may then be needed. In time, and with treatment, he may learn again to control his bowels.

Medical Treatment

The first part of treatment is to remove the stool that has collected in the anal canal. This is called the "cleanout." This process can be done by giving an enema through the rectum, or a solution through a nasogastric tube, into the stomach (Picture 4). This will remove the stool. It is very hard to control soiling until the rectum is empty, so the first "cleanout" step is very important. Once the stool is removed, treatment is aimed at keeping the rectum empty.

The second part of treatment is to give a stool softener or a laxative. A stool softener keeps hard stools from building up and filling the rectum. A laxative stimulates the colon to pass the stool.

Most children need treatment (maintenance therapy) for many months. In extreme cases, treatment may take years and may involve removing the part of the colon that does not work.

Nutrition

Your child's diet should include all the foods he needs for normal growth and development. High fiber foods like bran cereals, whole grain breads, fruits and vegetables contain roughage. These must be included in the diet to have normal, soft bowel movements.

Toilet Use

Help your child to follow a regular routine for bowel movements. He should sit on the toilet for 5 to 10 minutes after breakfast, after school and after dinner. You may read or play a game to occupy your child during this time. Make sure your child's feet are firmly supported on the floor or a footstool to keep his balance while he sits on the toilet.



Picture 4 The nasogastric tube.

Rewards Are Important!

It is important to reward your child for cooperating with his treatment. Rewards work much better than punishment. Young children respond well to stickers or candy treats. After your child sits on the toilet, even if he doesn't have a BM, you can reward him with his favorite treat (Picture 5). Use a variety of rewards to keep your child interested and willing to work for it.



Picture 5 Reward your child rather than punishing him.

Things to Remember

The problem of fecal soiling has developed over a long time. It may take a while to change the pattern. Normal bowel habits must be kept up for many months before your child is completely free of soiling accidents. Parents are often frustrated by this problem. This is very understandable. Keep in mind, with much encouragement and by following the treatment plan, your child will improve!

It is also possible that soiling may happen again after normal bowel habits have developed. When this happens, call your child's doctor or nurse practitioner for advice to help your child to regain control.

If you have any questions, be sure to call the doctor or nurse at _____.