

INFORMATION FOR PARENTS

Constipation



This leaflet explains constipation in children, why it happens, and what you can do to help. It also explains the treatment your doctor may recommend.

What is constipation?

Constipation means your child is not passing poo often enough, or their poo is hard, painful, or difficult to pass. Some children poo fewer than four times a week. Others may poo more often but still be constipated because they strain, struggle, or pass hard poos.

Constipation is very common in children. In a school class of 30 children, about 9 children will have constipation at some point during childhood.

What is the most common cause of constipation?

Poo moves through the bowel as a soft, watery mixture. As it passes through the large bowel, water is absorbed and the poo becomes soft and formed. It then collects in the rectum, which is the lower part of the bowel. When the rectum stretches, it sends a message to the brain that tells us we need to poo.

If a child passes a hard poo, it can hurt. They may then try to hold poo in because they are worried it will hurt again. Holding poo in makes the rectum stretch more. Over time, the stretched rectum does not squeeze poo out as well, and the child may stop feeling the normal signal that they need to poo.

Most children do not have an underlying medical condition causing their constipation. This is called functional or idiopathic constipation. Rarely, constipation can be caused by another health problem. Your doctor will check for this when they assess your child.

What is soiling?

If the rectum is full of hard poo, softer or runny poo from higher up the bowel may not be able to pass normally.

Instead, it can leak around the hard poo and come out into your child's pants. This is called soiling or overflow. It may look like sticky poo, watery poo, or small nuggets of poo. Your child usually cannot control this or may not even realise it is happening, so it is important not to blame them.

What other problems can constipation cause?

- Constipation can cause tummy pain.
- Large, hard poos can cause small painful tears near the bottom.
- Long-lasting constipation, especially with soiling, can affect a child's confidence and wellbeing. Reassure your child that soiling is not their fault and that you will work together to improve it.
- Constipation can also cause bladder problems, such as wetting, needing to rush to the toilet, or urinary tract infections. This can happen because a full rectum presses on the bladder.

How can we treat constipation?

Constipation can be treated successfully, but it often takes time and a regular routine. Medicine can help, but it works best when it is used with the toilet routine and support described below.

What part do parents play in this combined treatment plan?

Make the toilet a child-friendly place

Encourage your child to sit on the toilet for around five minutes at a time. Make this calm and positive by using praise, books, games, or another quiet activity. Help them sit comfortably with their feet supported on a step, stool, or box so their knees are higher than their hips. Laughing, coughing, or blowing bubbles can help the tummy muscles push poo out.

Sit your child on the toilet regularly

Your child may not feel the signal that they need to poo. They may also be worried about using the toilet. For this reason, it is important to sit them on the toilet 20 to 30 minutes after each meal. This is when the bowel is most active and they are most likely to have a poo.

Give lots of praise

Try to stay calm and relaxed. Praise your child for sitting on the toilet, even if they do not do a poo.

A reward chart can help. Small rewards, such as a little time on a phone or tablet, may also help motivate your child.

Do not tell your child off for soiling. It is usually outside their control. Instead, calmly encourage them to help clean themselves up after accidents.

Use a poo chart to keep track of what is happening

Children should not be left to manage toileting on their own. Even older children often need support. Use the poo chart given by your doctor to record what is happening. This helps your doctor plan treatment and helps you and your child see progress over time.

Healthy living

Water helps keep poo soft. A varied diet with fibre from fruit, vegetables, and cereals helps the bowel work well. Regular physical activity also helps poo move through the bowel.

What medicines will my doctor use to treat my child's constipation?

Laxatives are medicines used to treat constipation. There are two stages of treatment: disimpaction and maintenance. Disimpaction clears hard poo from the rectum.

Maintenance treatment then helps stop hard poo building up again. This is important because the rectum can take months, or sometimes years, to recover after being stretched. During maintenance treatment, the aim is for your child to pass at least one soft poo every day. Over time, your child may need less medicine and most children are eventually able to stop it.

How do I prepare laxatives for my child?

Some laxatives soften poo. Others help the bowel move poo along. Your child may need more than one medicine each day. Macrogol laxatives, such as Laxido, Movicol, or Cosmocol, must be mixed correctly to work well. Mix each sachet with the amount of water shown on the box. Once it is fully mixed, you can add flavouring such as squash, juice, milk, or hot chocolate. Always mix the macrogol with water first before adding anything else. If your child finds it hard to take, you can chill the prepared medicine in the fridge. It must be taken within six hours of being mixed.

What is a disimpaction?

Some children need a bowel clear-out before starting maintenance treatment. This is likely to be needed if your child is soiling regularly. A clear-out means giving increasing doses of laxatives over several days, or sometimes one to two weeks. This can be difficult to manage during school. If possible, it is best to do this during a school holiday. If this is not possible, your child will likely need time away from school while the clear-out is happening.

Your doctor will tell you how much medicine to give each day. Your child should take the daily dose of macrogol over 12 hours, or over six hours if they are aged 12 years or older. Mild tummy discomfort can happen during this process. Watch your child's poos closely. Usually, watery poo comes first, then lumps of poo. Keep going until the lumps have cleared and only brown watery poo is coming out. The next day, your child should start the maintenance dose.

Contact your hospital doctor if any of the following happen:

- The disimpaction has not worked after two weeks of treatment.
- Your child has severe tummy pain.
- Your child starts vomiting.
- Your child will not take their prescribed medicine.

What is my child's treatment plan?

You and your doctor may agree a written treatment plan for your child. If so, this will be printed and completed with your doctor in clinic.

What problems should I look out for?

Please seek advice if your child has any of the following:

- Persistent vomiting or any vomiting that is green.
- Bloating of the tummy.
- Severe tummy pain.
- Weight loss.

Where can I get further advice?

If you are worried or need advice, you can speak to:

- The consultant paediatrician looking after your child.
- Your GP
- An out of hours GP
- NHS 111.

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

ERIC bowel and bladder charity: eric.org.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

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If you require a full list of references for this leaflet (if relevant) please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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