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## CONSTIPATION AND FECAL SOILING

Fecal soiling is the leakage of stool (bowel movements or BM) that a child cannot control. Generally, the child is constipated and has a large amount of stool in his colon.

When the soiling is not caused by a disease, it is called encopresis (en-co-PREE-sis). For most children with encopresis, it has been a problem since the toilet training period.

### THE GI SYSTEM

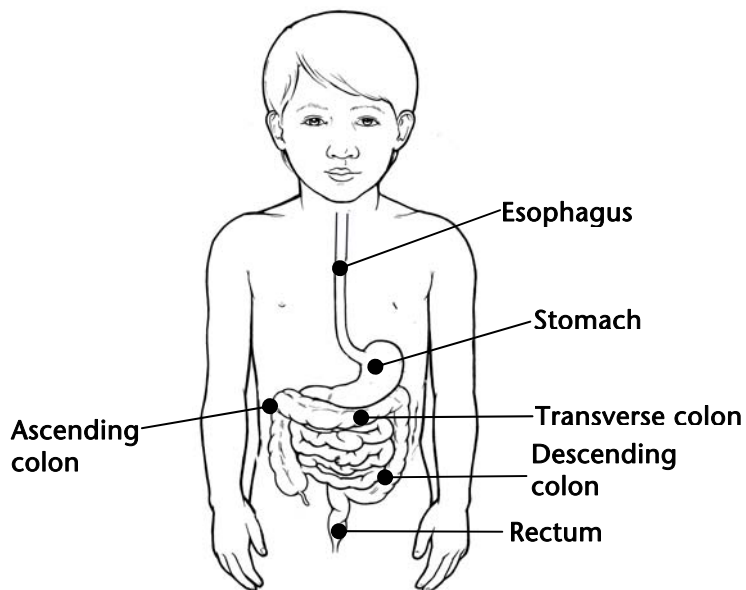
To understand encopresis, it helps to know how the gastrointestinal (GI) system works.

The main purpose of the GI system is to digest and absorb food so that 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 that is not used by the body passes through the small intestine in liquid form. In the colon, it becomes formed stool.

When stool passes into the rectum (the last part of the colon) the internal rectal sphincter relaxes (Picture 3, page 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 is built up. This fills up and stretches (distends) the anal canal. The nerves and muscles get stretched and the child loses the ability to sense that he needs to have a BM (Picture 4, page 2). 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.

The soiling is automatic and usually takes the child by surprise. **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.



**Picture 1** The normal gastrointestinal system inside the body.

## MEDICAL TREATMENT

The first part of treatment is to remove the stool that has collected in the anal canal. This is called the "cleanout." 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. Most children need treatment (maintenance therapy) for many months. In severe cases treatment may take years.

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.

## 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 that your child's feet are firmly supported on the floor or a footstool to keep his balance while he sits on the toilet.

## 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 1). Use a variety of rewards to keep your child interested and willing to work for it.

## REMEMBER

The problem of fecal soiling has developed over a long time. It may take awhile 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 that 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 doctor or nurse practitioner for advice help your child to regain control.

If you have any questions, be sure to ask your doctor or nurse.



**Picture 2** Reward your child rather than punishing him.



**Picture 3** The normal anal canal.



**Picture 4** The distended (stretched) anal canal.