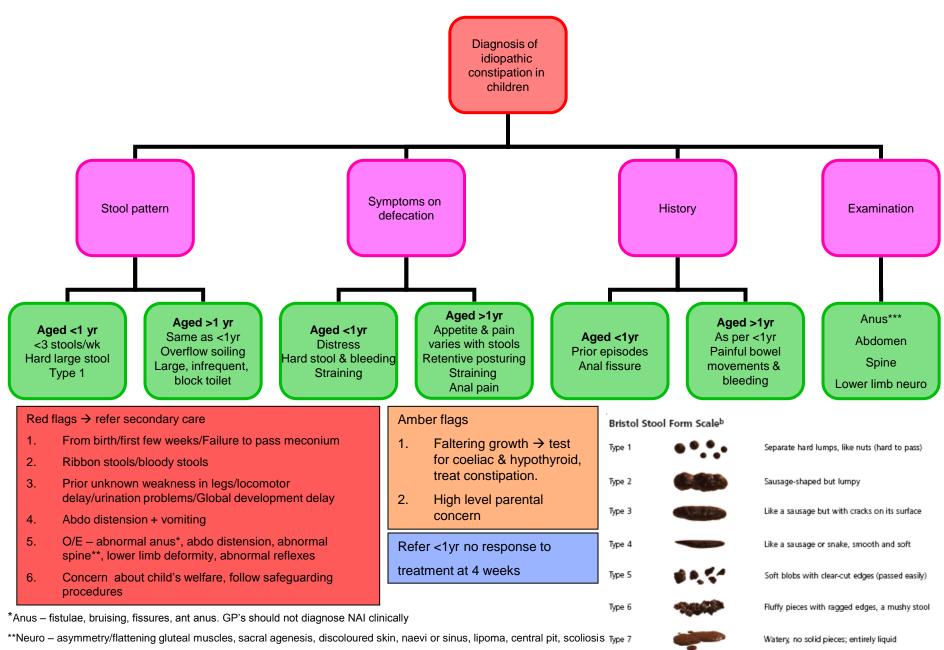
Rotherham Guidelines: management of Constipation in children and young people



^{***} PR only done by those who can diagnose Hirschsprungs/anatomical abnormalities

Rotherham Guidelines: management of Constipation in children and young people

Management of Idiopathic Constipation Manage expectations (see below) Dietary & Maintenance Disimpaction = Lifestyle Faecal mass palpated +/-Once disimpacted Overflow soiling Encourage and reward Scheduled toileting Macrogol - adjust to response* Treatment* Starting maintenance = Encourage sitting on toilet for Macrogol escalating dose 1/2 - 1/4 disimpaction dose 5mins post every meal → Do not underdose →increase stepwise reward/interesting Macrogolpaediatric plain Physical activity <1yr 1/2-1 sachet/d Macrogol paediatric plain 1-12yrs 1-6yrs 1 sachet/d adjusted to regular soft stool <1vr - 1/2-1 sachet/d 6-12yrs - 2 sachets/day (max 4/d) 1-5yrs sachets/day = $2 \rightarrow 4 \rightarrow 4 \rightarrow 6 \rightarrow 6 \rightarrow 8$ Adequate fluid & fibre intake 5-12yrs – 4 sachets day 1→steps of 2 sachets/d Healthy eating advice Macrogol adult up to 12 12-18yrs - 1-3 sachets/d divided doses Manage expectations Macrogol adult - 12-18yrs 1. Soiling worse during disimpaction 12-18yrs – 4 sachets day 1 → 2 sachets/d increments, max 8/d Teach parents how to adjust daily movicol 2. Address adult/child concerns re hidden pathology & long term laxative causing damage to bowel and Aim for sloppy or soft stool daily or alternate days Review at 1/52 - examine abdo 4. Soiling may take weeks/months to improve: If not disimpacted - repeat above + sodium provide frequent moral support, many children are If movicol not sufficient/not tolerated → sodium picosulphate on laxatives for years picosulphate Never stop or run out of laxatives, have 'rescue' Anticipate/preempt re impaction – BNO for 2/7 picosulphate to manage re-impaction 'rescue' picosulpate until BO 2/52 no improvement → sodium picosulphate 6. Ensure adequate water mixed with movicol and given alongside to prevent dehydration Or movicol not tolerated → change to sodium Additional areas of help picosulphate +/- osmotic Continue until regular bowel habit for few months 1. <5yrs of age nursery nurses can support family Slowly over 3-6/12 reduce laxatives Increase if bowel frequency decreases SPA/STEPPS can help with child/parent motivation & compliance & behavioural issues 3. CAHMS/psychology referral for e.g. toilet phobia,

'dependence'

behavioural withholding, mental health co-

morbidities of soiling, motivation etc

Ensure adequate water mixed with movicol and water given alongside to prevent dehydration

Use sodium picosulphate early, doses of sodium picosulphate – 2.5mg daily, increase by 2.5mg every 2-3days. Max 10mg 1month to 1year, max 20mg age 4-18years