#### Treatment

This is a mechanical problem so a mechanical solution is required, along with the development of good toileting habits.

## Unblocking

The first aim is to empty the rectum. This can usually be achieved by giving large doses of laxatives. There is a large amount



of pooh in the bowel so there is a lot to come out. The pooh needs to be very soft and sloppy. The soiling problem can be worse than ever during the first weeks of treatment. Starting treatment at a weekend or a school holiday can be a good idea, or a week off school may be needed.

When the rectum is empty, it must be kept empty for several months to allow the wall muscles to recover. The sensations of pooh arriving in an empty rectum will gradually return and the child will begin to get the messages and be able to feel when it is time to go to the toilet. At this stage, smaller doses of laxatives are needed — the aim is to produce a motion every day.

If the bowels are very blocked up, enemas or washouts may be needed initially.

# Good Toilet Sitting Habits

To retrain the bowel emptying habit, your child should be encouraged to sit on the toilet twice daily for 5 minutes. Starting about 10 minutes after breakfast and after the evening meal.

This needs to be a pleasant relaxing time and often needs parental help to make it fun.

A bowel action may not be passed initially. A reward system can be used to encourage good sitting and the passage of stools. For small children a foot stool will encourage a good sitting position.

### Diet

Encourage a healthy diet with plenty of cereals, fruit and vegetables. An increased fibre intake needs an increased fluid intake.

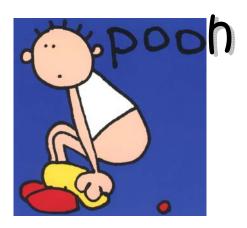
#### Exercise

Encourage your child to be active, exercise helps to keep everything moving.

## Help

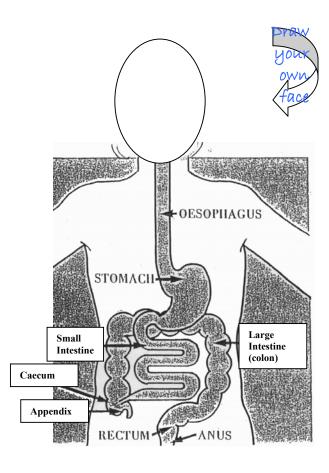
f you need some toiletting training tips or help with a programme you could contact your Public Health Nurse,





A guide for





Soiling is a very common problem affecting many children. It usually occurs between the ages of 2 and 8 years but can present later.

The social effects mean that most children are seen by a doctor, or nurse, at or just before kindergarten or school entry. Most schools and kindergartens will have a child with this problem.

Children usually grow out of this by the time they are teenagers. However, with help the process can be speeded up and soiling can be overcome earlier.

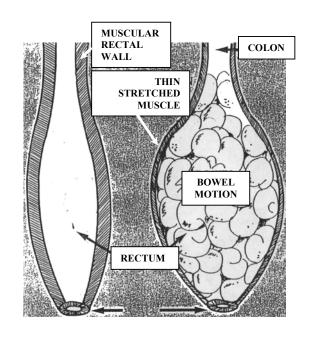
Children with soiling or skid marks on their pants do not know when it is happening.

It is not their fault and they do not do this on purpose.

# What has caused this?

At some stage, months or years ago, the child began to hold back the normal process of passing bowel motions. It may have been because their motions were hard and hurt, or caused a tear when they were passed, and the child became afraid to go to the toilet; or it may simply be that the child was too involved in play or too rushed to go to the toilet.

By now the original cause will have long gone, but the mechanical consequences remain. Bit by bit a large lump of pooh will have built up in the rectum — the end bit of the large bowel. This build up stretches the rectum to become like a floppy bag. The feeling of fullness has gone, the rectum no longer sends messages of the need to be emptied. Bits of pooh can then just fall out. This can happen on exercise, while having a shower or bath, or even when asleep. When new softer pooh arrives it can sneak round the hard lumps and trickle out through the anus onto the skin and pants.



It is not the child's fault
The child is not being lazy
Punishment is not likely to
alter this pattern