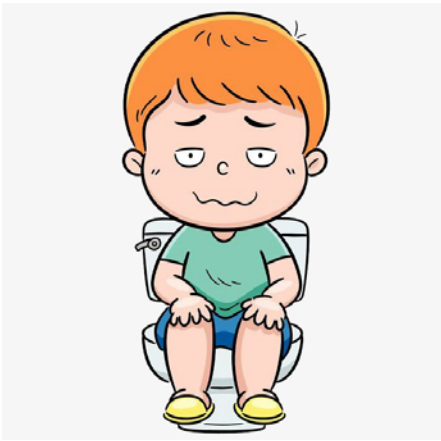


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Stitichezza (stipsi) Constipation



WHAT IS IT?

Constipation is difficulty moving the bowels. It is distinguished by a low number of bowel movements (fewer than 3 times a week) and/or movements of hard stools (shaped like small or very large balls), which may even occur every day. It may even occur together with involuntary losses of small quantities of faeces (the child "soils his underwear") or with a desire to retain stools or to deliberately refuse to move the bowels, along with pain during defecation. Additional symptoms may include stomachache, irritability and loss of appetite.

Constipation is very common, but is rarely a symptom of a disease.

WHAT ARE THE CAUSES?

- lack of fruit, vegetables and whole-grain foods in the diet
- inadequate intake of fluids
- lack of physical exercise
- incorrect position when moving the bowels
- psychological reasons (for example, at the beginning of toilet training, when school starts, when a change occurs in the child's environment)

Hard and/or very large stools can cause injury to the anus and pain during bowel movements. This painful experience induces the child to shy away from moving his bowels, which in turn results in a vicious cycle that leads to the persistence of constipation.

WHAT SHOULD I DO?

1. Stimulate bowel movement:

- a. To solve the problem quickly, administer **laxative enemas after a meal** (1 or 2 micro-enemas for children under 2; in healthy older children, use enemas containing phosphate; half an enema for children from 2 to 5; one enema for children over 5).
- b. To solve the problem more slowly but less invasively, use products containing a high dose of **macrogol** (polyethylene glycol or PEG) for the first 2-3 days (around 1 g. per day for each kilo of weight), and then administer a maintenance dose according to your paediatrician's instructions.

2. To restore normal stool consistency and regular bowel movements:

- a. give macrogol regularly according to your paediatrician's instructions
- b. make sure your child's diet is rich in fruit, vegetables and whole-grain foods
- c. have your child drink more plain water
- d. try training your child to move his bowels at fixed times during the day by urging him to go to the bathroom after meals, and have him sit on the toilet/potty for at least 5 minutes;
- e. during a bowel movement, it's useful to have your child maintain a **correct seated position**, with his feet firmly planted on a support that raises his knees higher than his pelvis (the correct position for adults as well).



Keeping these good habits over time will prevent constipation from recurring.

WHEN SHOULD I GO TO THE EMERGENCY ROOM?

If your child:

- vomits constantly and repeatedly
- has strong, continuous abdominal pain (stomach ache).

REMEMBER THAT:

It's normal for nursing babies to experience difficult bowel movements, because their intestinal functions are still immature.

If your nursing baby does not have a bowel movement for 2-3 days and seems irritated, cries intermittently, has a poor appetite and a bloated belly, and spits up frequently, it's a good idea to stimulate him after meals with a micro-enema or rectal probe (lubricated with vegetable oil).