

# Bowel Management

## What is it?

Children soil themselves when they are unable to control the emptying of their bowels, this may be due to constipation. This is not an uncommon problem, yet it can cause enormous stress and upset for the child and family. Many children benefit from individualised bowel management programmes. These can be initiated and supervised by your child's doctor or a specialist nurse. To achieve success in any bowel management programme, it is essential that it is established alongside normal toilet training routines.

- ▶ First, a detailed assessment is required before a programme can be planned.
- ▶ You will be asked to fill in some bowel charts, so that an accurate record of your child's bowel pattern can be monitored.
- ▶ After the assessment the treatment options will be discussed with you and your child. It is important that you are both happy with the final decision.

- ▶ For bowel management programmes to be successful, you will need a lot of patience, persistence and motivation. You will also need ongoing support from your child's medical team.

## In addition to toilet training routines there are three main bowel management options:

- ▶ medication
- ▶ colonic irrigation
- ▶ surgery - ACE (Antegrade Colonic Enema), colostomy or ileostomy

Or a combination of the above may be appropriate.



## Bowel management using medication

The aim of using medicines is to help the child to produce a regular bowel motion, preventing poo being stored too long in the rectum and subsequently causing overflow soiling. Each child needs a different amount and type of bowel medicine. The exact amount required can only be determined by trial and error. Constant reassessment and fine adjustments are essential in improving continence.

### Types Of bowel medicines:

Softeners and stimulants are also known as laxatives.

- 1. Softeners** – softens hard poo. Useful if your child passes hard pellet-like poo, strains, or cries in pain when passing poo.
- 2. Stimulants** – these help the large bowel to contract more, pushing the poo along. Useful if your child needs additional help to push the poo out or they have a slow gut motility. Can cause wind and tummy spasms.
- 3. Bulking agents** – if the poos are loose and your child does not have 'overflow' diarrhoea, bulking agents might be helpful. It can be very difficult for a child to control loose poos and they will stand a better chance if the poo is more formed.

- 4. Medicines to slow the gut down** – useful if your child has a short gut or very rapid gut motility, resulting in loose poos being passed. If the speed of the waste material being passed along the large bowel is reduced, more fluid will be reabsorbed back into the body resulting in a more formed poo being passed.

- 5. Rectal suppositories or enemas** – these are useful if your child tends to store large amounts of poo in the rectum. They help to soften the poo and stimulate the bowel to push the poo out.

**NB. It is very important if your child has been prescribed medication to help with bowel control that you do not stop, increase or decrease the medication without first seeking medical advice. Your child is likely to require the medication for a long period of time.**

For additional information, refer to the 'Toilet Training' information leaflet.