

FUNCTIONAL CONSTIPATION HANDOUT

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 No conflict of interest to declare

TABLE 2. Rome III diagnostic criteria for functional constipation

In the absence of organic pathology, ≥ 2 of the following must occur

For a child with a developmental age < 4 years*

1. ≤ 2 defecations per week
2. At least 1 episode of incontinence per week after the acquisition of toileting skills
3. History of excessive stool retention
4. History of painful or hard bowel movements
5. Presence of a large fecal mass in the rectum
6. History of large-diameter stools that may obstruct the toilet

Accompanying symptoms may include irritability, decreased appetite, and/or early satiety, which may disappear immediately following passage of a large stool

For a child with a developmental age ≥ 4 years with insufficient criteria for irritable bowel syndrome[†]

1. ≤ 2 defecations in the toilet per week
2. At least 1 episode of fecal incontinence per week
3. History of retentive posturing or excessive volitional stool retention
4. History of painful or hard bowel movements
5. Presence of a large fecal mass in the rectum
6. History of large-diameter stools that may obstruct the toilet.

* Criteria fulfilled for at least 1 month. Adapted from Hyman et al (12).

† Criteria fulfilled at least once per week for at least 2 months before diagnosis. Adapted from Rasquin et al (13).








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TABLE 5. Alarm signs and symptoms in constipation

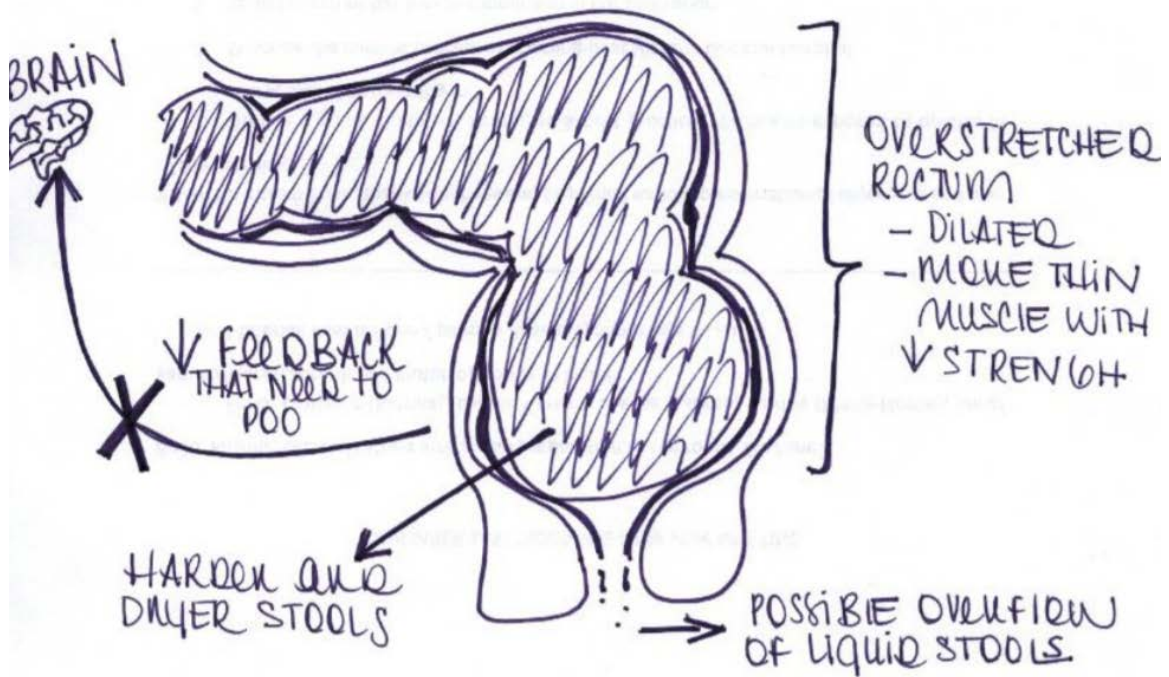
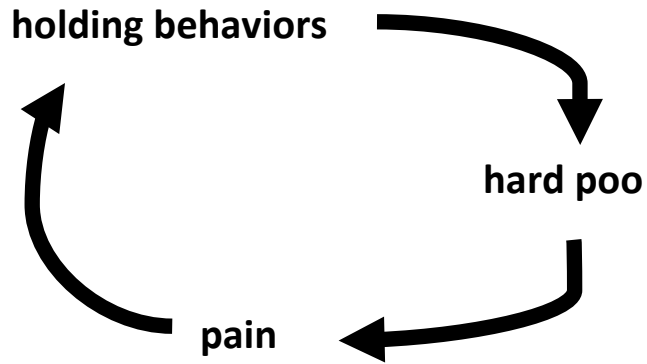
Constipation starting extremely early in life (< 1 mo)
 Passage of meconium > 48 h
 Family history of HD
 Ribbon stools
 Blood in the stools in the absence of anal fissures
 Failure to thrive
 Fever
 Bilious vomiting
 Abnormal thyroid gland
 Severe abdominal distension
 Perianal fistula
 Abnormal position of anus
 Absent anal or cremasteric reflex
 Decreased lower extremity strength/tone/reflex
 Tuft of hair on spine
 Sacral dimple
 Gluteal cleft deviation
 Extreme fear during anal inspection
 Anal scars

HD = Hirschsprung disease.

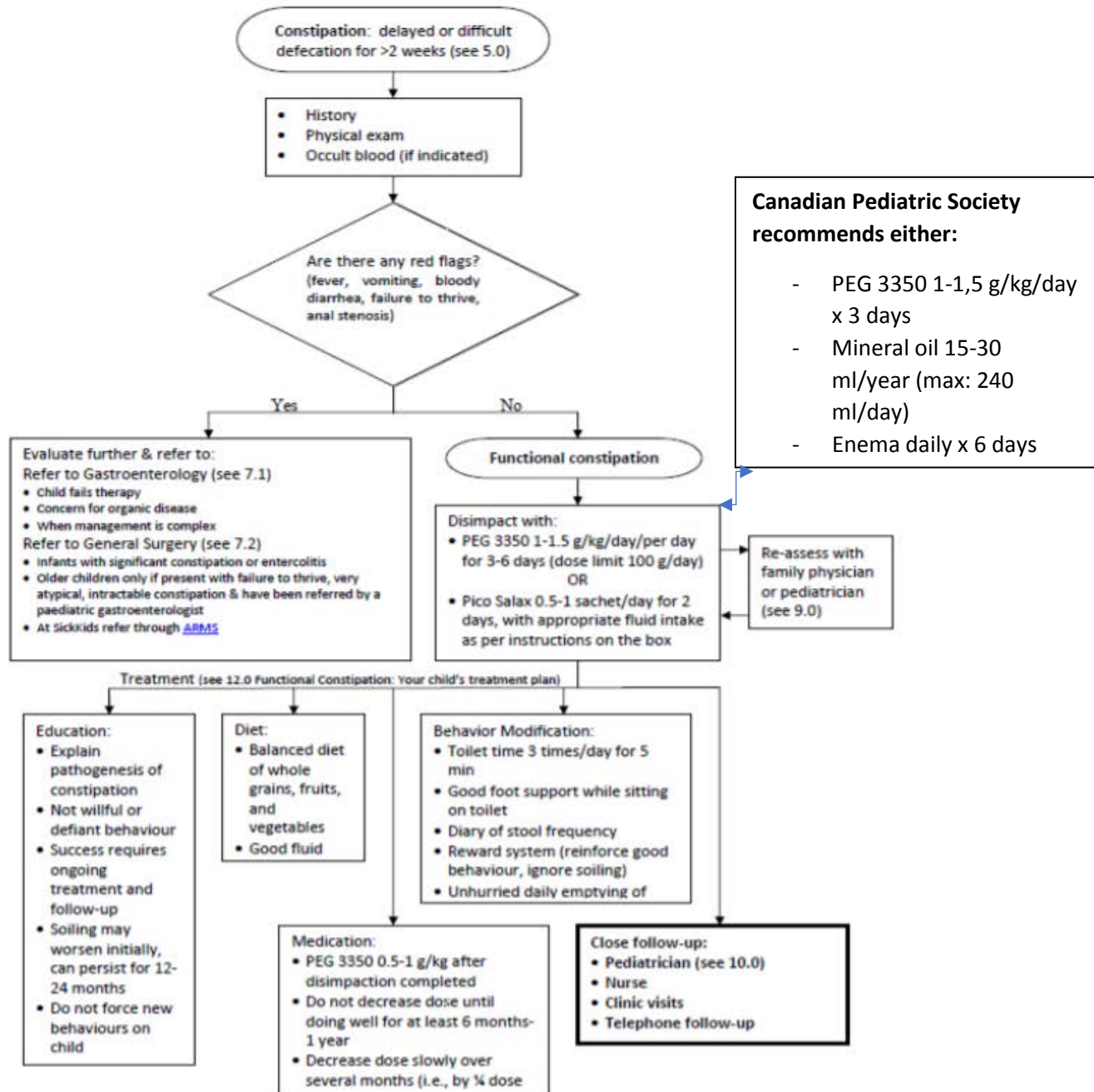
Bristol Stool Chart

Type 1		Separate hard lumps, like nuts (hard to pass)
Type 2		Sausage-shaped but lumpy
Type 3		Like a sausage but with cracks on its surface
Type 4		Like a sausage or snake, smooth and soft
Type 5		Soft blobs with clear-cut edges (passed easily)
Type 6		Fluffy pieces with ragged edges, a mushy stool
Type 7		Watery, no solid pieces. Entirely Liquid

THE VICIOUS CYCLE OF CONSTIPATION



4.0 Decision Tree/Algorithm



Laxative	Dosage	Side effects
Lactulose	1 mL/kg/day – 3 mL/kg/day in divided doses	Flatulence, abdominal cramps
Milk of magnesia (Magnesium hydroxide)	1 mL/kg/day – 3 mL/kg/day of 400 mg/5 mL available as liquid	Magnesium poisoning (infants). In overdose, hypermagnesemia, hypophosphatemia and secondary hypocalcemia
Polyethylene glycol 3350	Disimpaction: 1 g/kg/day – 1.5 g/kg/day for 3 days Maintenance: Starting dose at 0.4 g/kg/day – 1 g/kg/day	Limited. Occasional abdominal pain, bloating, loose stools
Polyethylene glycol-electrolyte solution (lavage)	Disimpaction: 25 mL/kg/h (to 1000 mL/h) by nasogastric tube until clear effluent Maintenance: 5 mL/kg/day – 10 mL/kg/day (older children)	Nausea, bloating, abdominal cramps, vomiting and anal irritation
Mineral oil	Disimpaction: 15 mL/year – 30 mL/year of age (up to 240 mL daily) Maintenance: 1 mL/kg/day – 3 mL/kg/day <1 year of age: Not recommended	Lipid pneumonia if aspirated. Theoretical interference with absorption of fat-soluble substances, but no evidence
Senna	2–6 years: 2.5 mL/day – 7.5 mL/day 6–12 years: 5 mL/day – 15 mL/day	Idiosyncratic hepatitis, melanosis coli, hypertrophic osteoarthropathy, analgesic nephropathy
Bisacodyl	Oral: 3–12 years: 5 mg – 20 mg Rectal: <2 years: 5 mg/day 2–11 years: 5 mg/day – 10 mg/day	Abdominal cramping, nausea, diarrhea, proctitis (rare)
Docusate sodium	5 mg/kg/day divided three times a day or as a single dose	Abdominal pain, cramping, diarrhea
Glycerin suppositories	–	None
Phosphate enemas	<2 years old: Not recommended >2 years: 6 mL/kg (up to 135 mL)	Risk of mechanical trauma to rectal wall Abdominal distention or vomiting Hyperphosphatemia, hypocalcemia

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<https://www.aboutkidshealth.ca/article?contentid=6&language=english>

*available in multiple languages

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