

Constipation and childhood cancer

Constipation, or difficulty passing a bowel movement, is a common problem for many children with cancer.

Managing your child's bowels is an important part of helping them to feel well. There are many reasons your child may develop constipation, including the cancer itself and the treatments and medications they need.

What is constipation?

- Fewer bowel movements than is normal for your child, especially less than 3 times per week.
- The need to strain or push hard to empty their bowel.
- Feeling that they cannot completely empty their bowel.
- Passing hard pellets or marble-like bowel movements.
- Bowel movements that are hard and dry, and difficult or painful to pass.

Your child may also:

- feel nauseated or vomit
- have a poor appetite
- have abdominal pain, gas or cramping pain
- have a noisy, gurgling stomach
- · pass more than a usual amount of gas
- have less desire to eat or feel full very quickly
- have oozing or seeping stool which happens when liquid stool seeps around a hard mass of feces (bowel movement)
- notice smears of feces on their underwear or the tissue when they
 go to the bathroom. This can be confused for diarrhea or loose
 stools but it is actually a symptom of constipation.





Do my child's bowels need to move every day?

There is a wide range of what is a normal pattern of bowel movements. Some children go 1 to 2 times a day while others go 2 to 3 times a week.

What matters most is that your child has regular bowel movements that are soft and easy to pass.



Why does my child get constipated?

As food moves through your child's bowels, nutrients are absorbed out of the bowels and into the body. Waste continues to pass through the bowels as stool. Sometimes, the intestines slow down, and the stool moves through too slowly. This allows more water to be absorbed from the bowels, making stools hard and dry.

There are many reasons that a child with cancer may develop constipation, including the cancer itself and the treatments they need.

Reasons your child may be constipated include:

- drinking less fluids, or not enough water
- eating less or different types of foods
- being less active, spending more time sitting and lying down
- not eating enough fibre
- pressure on the stomach or intestines from a tumour
- some medications for nausea
- some medications for pain called opioids
- chemotherapy drugs such as vincristine and vinblastine





How can I help my child have healthy bowel habits?

- Monitor your child's bowel movements
- How often your child's bowels move.
- The size of your child's bowel movements.
- What your child's bowel movements look like.
- How much your child needs to push to get their bowel to empty.
- How often your child tries to go and is unable to empty their bowel.
- Encourage your child to drink water several times a day
- Choose fluids they enjoy as they will be more likely to drink.



- Increase the fibre in their diet, if you are able.
- Increase the amount of fibre in your child's diet slowly. A quick change from low fibre to high fibre can cause an increase in gas, cramps and bloating.
- Foods that contain the most fibre are:



Fruit: pears, apples, berries, oranges Vegetables: broccoli, Brussel sprouts, carrots,

squash, potatoes





Grains: whole grain breads, brown rice, oatmeal **Nuts and seeds**: almonds, peanuts, sunflower

seeds, walnuts



There is a necessary balance between fibre content of the diet and fluid intake.

Fibre, especially when they are not able to drink enough, can actually cause severe constipation.



4. Encourage activity	 Encourage your child to play and be active. Moving around helps the bowels to work. Go for walks if possible, or even just have them pump their legs up and down in their bed.
5. Have your child sit on a toilet or a potty	They should be able to have their feet flat on the floor and their knees slightly bent.
	If the toilet is too high try using a small stool that they can put their feet on with a slight bend in their knees.
6. Start a routine	 Have your child sit on the toilet for 20 to 30 minutes in the morning or after a meal.
	 Teach your child to pay attention when they feel it's time to use the toilet. Your child should not ignore this feeling or try to hold in a bowel movement.

Medication for constipation

Medications for constipation are often called laxatives. They work by either softening the stool or helping the bowel to move more easily.

Your child may be given one or more types of laxatives. It is important that your child takes this medication as directed by their health care team. It is not harmful to use laxatives to treat your child's constipation. Your healthcare team will instruct you on how often to use them.





Continue to give the laxatives to your child as directed by your health care team, even after your child has had a bowel movement.

Constipation needs long-term laxatives even after your child starts to have bowel movements.

Common laxatives for children:

Peg Flakes (Lax-a-day®, RestoraLAX®, MiraLax®)	 This works by keeping fluid in the bowel It helps to soften the stool making it easier to pass
	 It is a powder that is tasteless and can be added to any drink
	 Loose bowel movements means you might need to give your child a smaller dose and/or take it less often
Senna (Senokot®) Bisacodyl (Dulcolax®)	These laxatives help the bowel push the contents through by increasing the muscle contractions of the bowel



Do not use suppositories or enemas without first discussing with your health care team

If your child's bowel movements are still hard and dry talk to your doctor or nurse.