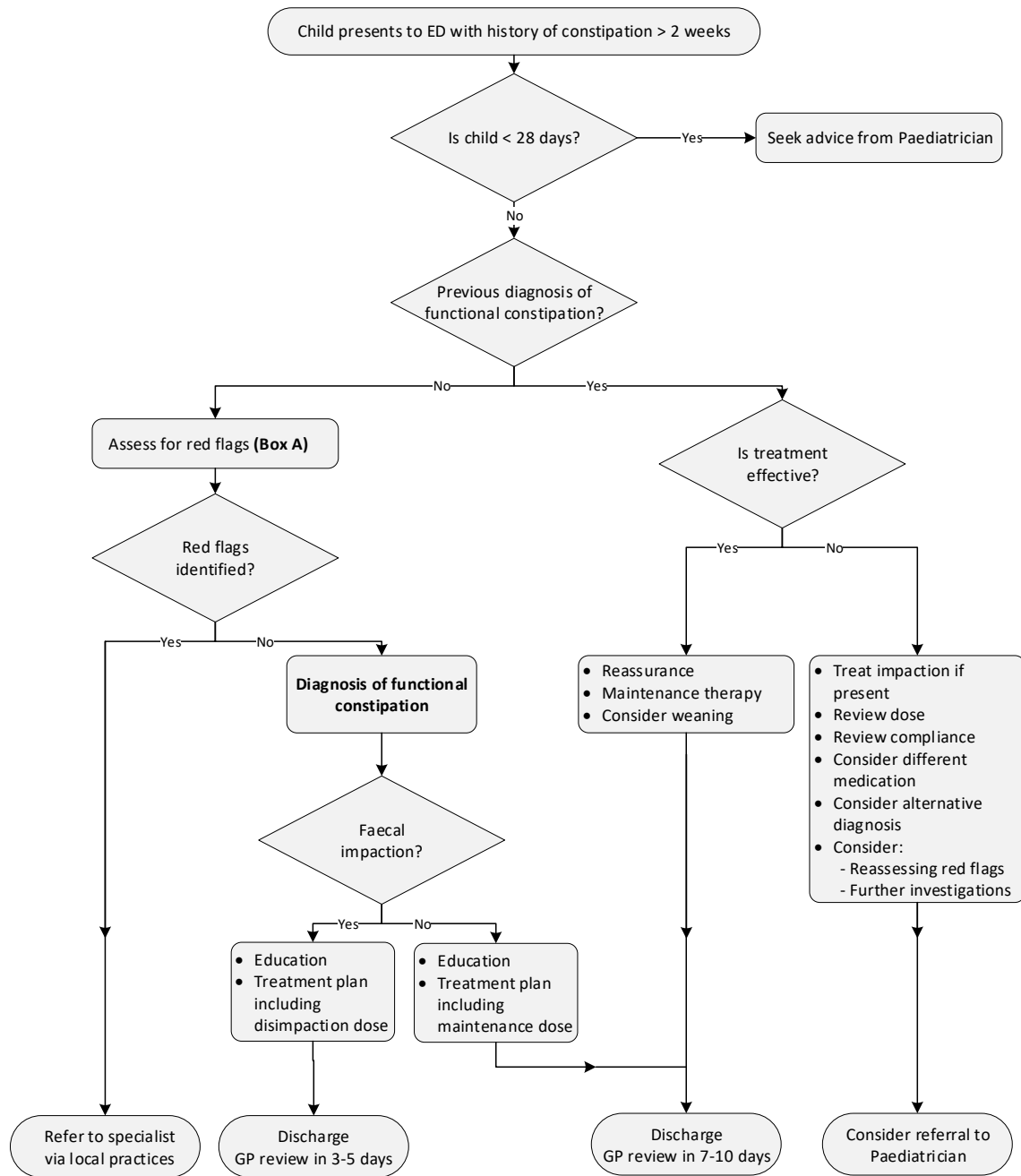


Constipation – Emergency management in children – Flowchart



Box A: Red flags to suggest underlying pathology

- Delayed passage of meconium (> 48 hours)
- Perianal disease
- Blood in stool (gross or occult)
- Thin strip-like stool
- Vomiting (especially bilious)
- Systemic symptoms (fever, weight loss, delayed growth)
- Extra intestinal symptoms of Inflammatory Bowel Disease (rashes, arthritis, sore eyes, mouth ulcers)
- Urinary problems (frequent UTI/retention)
- Abnormal lower limb neurology
- Deviated gluteal cleft
- Patulous anus

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Constipation – Emergency management in children – Medications

Medication for the treatment of constipation in children				
Medication	Flavour	Amount	PEG 3350 Content	Electrolytes
Movicol- Full	Flavourless, lemon-lime, chocolate	1 sachet	13.125 g	Yes
Movicol- Half/ Junior	Half- Lemon-lime Junior- Flavourless	1 sachet	6.563 g	Yes
Osmolax	Flavourless	Small scoop Large scoop	8 g 17 g	No

Polyethylene glycol (PEG 3350) dosing for the treatment of constipation in children	
Initial disimpaction dose (Oral)	<p>1.5 g/kg/day for three days</p> <p>Review after three days to determine if treatment has been successful.</p> <p>Overflow incontinence can result from faecal impaction and indicates the need to increase (not decrease) the dose.</p>
Maintenance dose (Oral)	<p>Adjust dose according to symptoms and response.</p> <p>As a guide start with half the disimpaction dose (on average 0.75 g/kg/day).</p> <p>Customise the dose by increasing or decreasing the total dose by around 25% every two to three days until stools are soft.</p>

For more information refer to [CHQ-GDL-60003 - Constipation – Emergency management in children](#)

