Länsi-Uudenmaan hyvinvointialue
Västra Nylands välfärdsområde

Childhood constipation

Bedwetting and constipation are common in young children. Stool frequency varies widely. Some infants and toddlers pass stool after most feeds/meals (often 3–5 times a day). Because milk builds stool mass slowly, a small infant may go more than a week between bowel movements without any problem in bowel function.

On average, stool frequency decreases from about four times a day in a few-weeks-old infant to 1–2 times a day by the age of four.

Symptoms of constipation

Constipation means bowel movements are painful or infrequent (less often than every three days). Typical features include large, hard stools and withholding behaviours (avoiding the urge to go).

Constipation most often begins between ages 2 and 4, but it can also appear during the first year of life. In over 90% of children, constipation is functional—in other words, not caused by an underlying disease—and a specific trigger is often not found.

Toilet habits

To treat constipation, regular toilet routines are central. Because the urge is strongest after meals, your child should become used to sitting on the toilet after a main meal, even if they don’t feel the urge. Aim for a calm 10–15-minute sit. Praise success but don’t criticise if nothing happens. If your child is clearly withholding, gently guide them to the toilet then as well.

Good positioning matters. A step stool/chair is essential so the feet are supported and the body can relax, helping the rectum empty fully. The ideal posture is a slight forward lean, feet firmly on the stool, hands resting on the legs (not gripping the seat).

Treating constipation (diet/medicine)

Constipation is primarily treated with adequate fluids, dietary changes, and physical activity. If these are not sufficient, a laxative (e.g., Pegorion) can be used.

Nutrition and fluid intake

It is important for the child to drink a sufficient amount of fluids throughout the day (1–2 glasses with breakfast and lunch; 1 glass with a snack; 2 glasses with dinner; and 1 glass with the evening snack). The main drink should be **water** (or, if needed, **very** diluted juice).

Milk and dairy products: preschool children about 400 ml/day; school-aged children 500–600 ml/day.

Ensure sufficient fibre intake and regular meal routines. **The most important sources of dietary fibre are wholegrains, vegetables, fruit, and berries.** Insoluble fibre (especially in whole grains) is most effective for constipation. In addition, soluble fibre (oats, berries, fruit, vegetables) also supports bowel function. Aim for five portions of vegetables and fruit per day (1 portion = the child's handful).

Fibre supplements such as wheat bran or oat bran can be mixed into porridge or yoghurt. Choose whole-grain products (pasta, rice, bread). Choose bread with at least 6 g fibre per 100 g.
Dried prunes are a traditional way to treat constipation. Soak 2–3 dried prunes overnight. The child can eat them and drink the soaking water in the morning (for example, blended into a smoothie). Other dried fruits are also high in fibre and can be given to the child instead of sweets (e.g. raisins, dates, figs, currants, apricots).

Physical activity stimulates the gut. Encourage the child to move actively daily. Children often enjoy physical games and sports.

Medication

If diet and fluids are not enough, start with a mild laxative. Over-the-counter **macrogol** (e.g. Pegorion) is safe and often necessary. Begin with a higher initial dose (about 1 g/kg/day) so stools become soft and pass easily, making withholding impossible. In the first weeks, accidents and very loose stools are common as softer stool passes around built-up stool in the rectum. **In such cases, do not reduce the dose, increase it instead.** Macrogol is safe even at higher doses, and treatment should continue at least as long as the constipation has lasted.

When treating constipation and soiling, children need firm but gentle encouragement. Soiling is not deliberate. When guiding a child to the toilet, don’t ask whether they need to go; say it’s time to try, and go calmly together.

If needed, you can consult the public health nurse who supports children with bedwetting and constipation. To do so, contact appointment booking and counselling for maternity and child health clinics via the Lunna app or by phone 029 151 2400 (Mon–Fri 9:00–12:00).