

Good Bladder/Bowel Habits in Children



Public Health Nursing Service

child health

he whakaaritanga hauora koreutu mo nga tamariki katoa

Most children are developmentally and physically ready to begin toilet training between 18 months and 3 years of age.

Daily fluid intake

A child needs to drink five to six evenly spaced cups of water each day (5 to 6 cups of water throughout the day).

Ideal drinking times should be — breakfast, morning tea, lunch, afternoon tea and dinner time.

This is to ensure the urine in the bladder is diluted enough not to cause irritation to the bladder. This irritation can lead to bladder spasm which can cause bladder leakage.

If your child is not a good drinker then start slowly. Begin with what they can drink and work up to six evenly spaced cups of water per day.

If you expect them to drink too much too soon, they may feel bloated with the increase in fluid, and may become resistant to drinking.

It is important as a parent/carer that you take responsibility for reminding your child to drink and ensure they take a drink bottle with them to school. This may be necessary for five to six months to ensure your child has established a routine around normal drinking habits.

The best thing to drink is water. Avoid fizzy, juice or other drinks that may contain caffeine as these drinks irritate the bladder and make it more difficult to hold on.

Good daytime bladder habits

When a child is drinking enough they should be able to hold on between trips to the toilet for 2 to 3½ hours and pass a good amount of urine. If your child is unable to hold on it would be advisable to discuss this with your doctor.

Check your child is having normal bowel motions (poos)

Normal bowel habits are different for everyone, Keep a check on your child's poo, it should be a type 4, soft and easy to pass at least four times per week. (see picture over leaf)

Ask your child if it is easy to do poos. If not, ensure they are drinking enough — five to six cups of water a day, as increasing their fluid can help them pass a soft motion. Eating a diet containing fibre (eg. fruit and vegetables, Weetbix, porridge, wholemeal bread, bran muffins, beans) can also be helpful. See <http://www.healthinfo.org.nz/> for more information.

When constipation exists a child can become reluctant to use the toilet due to pain when trying to poo. Constipation can also result in soiling and day time wetting.

If any of these symptoms are present or if your child is not having a soft and easy to pass poo **please see your GP.**

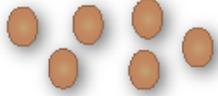
Toilet times for bowel motion (poo)

It is important for children to establish a regular toilet routine and this can be achieved by either:

- Encouraging your child to sit on the toilet **twenty to thirty minutes** after a meal and sit for **five to ten minutes.**
- And/or take note of when your child usually does a poo and continue to encourage them to sit on the toilet at that time each day.

 **Keep a check on your child's poo, it should be a type 4 soft and easy to pass at least four times per week.**

Modified BRISTOL STOOL CHART

Type 1		Separate hard lumps, like pellets (hard to pass)
Type 2		Log shaped but lumpy
Type 3		Like a log but with cracks on the surface
Type 4		Like a log or snake, smooth and soft
Type 5		Soft blobs with clear-cut edges
Type 6		Fluffy pieces with ragged edges, a mushy stool
Type 7		Watery, no solid pieces, entirely liquid

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 **Passing a bowel motion more than three times per day is not right either. If it looks like Type 7, it could be diarrhoea or overflow caused by constipation!**

Please see your GP if this is the case for further support.

References

ERIC's Guide to Children's Bowel Problems 2013
NZCA Continence Care Training Tool 2009
CFA The Dry Night 2005
June Rodgers PromoCon 2004