

Infancy

The onset of constipation frequently occurs during infancy and may result from organic causes, such as Hirschsprung disease, hypothyroidism, and strictures. It is important to differentiate these conditions from functional constipation. Constipation in infancy is often related to dietary practices. It is less common in breastfed infants, who have softer stools than bottle-fed infants. Breastfed infants may also have decreased stools because of more complete use of breast milk with little residue. When constipation occurs with a change from human milk or modified cow's milk to whole cow's milk, simple measures such as adding or increasing the amount of vegetables and fruit in the infant's diet and increasing fluids such as sorbitol-rich juices usually corrects the problem. When a bottle-fed infant passes a hard stool that results in an anal fissure, stool-withholding behaviors may develop in response to pain on defecation (see [Critical Thinking Case Study](#)).

Critical Thinking Case Study

Constipation

Harry, an 8-month-old infant, is seen by the pediatric nurse practitioner for his well-child visit. Harry's mother states that he usually has one hard stool every 4 or 5 days, which causes discomfort when the stool is passed. He has also had one episode of diarrhea and two episodes of ribbon-like stools. Abdominal distention and vomiting have not accompanied the constipation, and Harry's growth has been appropriate for his age. Currently, his diet consists of cow's milk-based formula only. Harry's mother reports that the infrequent passage of hard stools began approximately 6 weeks ago when she stopped breastfeeding. Which interventions should the nurse practitioner include in the initial management of Harry's problem?

Questions

1. Evidence: Is there sufficient evidence for the nurse and nurse practitioner to draw any conclusions about the management of Harry's problem?