

Children without bowel impaction can start treatment immediately. Dietary modifications, lubricants, and behavior therapy that encourage the child to establish normal defecation are used. Dietary changes including consumption of increased amounts of high-fiber foods such as fruits, vegetables, cereals, and increased hydration with water are encouraged. Stool softeners and laxatives are used until stools become soft. Behavior therapy, such as maintaining regular bathroom routines, increasing exercise, and having the child take on more responsibility for their bowel program, is a vital part of the treatment plan (Coehlo, 2011). Psychotherapeutic intervention with the child and the family may become necessary.

Nursing Care Management

A thorough history of the soiling is essential, including when soiling began, how often it occurs and under what circumstances, and whether the child uses the toilet successfully at all. Because the parents and child are reluctant to volunteer information, direct questioning about the soiling is more successful.

Education regarding the physiology of normal defecation, toilet training as a developmental process, and the treatment outlined for the particular family is a prerequisite to a successful outcome. Bowel retraining with mineral oil, a high-fiber diet, and a regular toileting routine is essential in treating encopresis or chronic constipation. The toilet routine should consist of the child sitting on the toilet 10 to 15 minutes after meals for intervals of 10 minutes, and placing a footstool below the feet may relax the abdomen and make the child more comfortable. Positive reinforcement such as giving stickers, praising the child, and awarding special activities may encourage the child to participate in the bowel regimen.

Family counseling is directed toward reassurance that most problems resolve successfully, although the child may have relapses during periods of stress, such as vacations or illness. If encopresis persists beyond occasional relapses, the condition needs to be reevaluated. Behavior modification techniques are explained, and the family is assisted with a plan suited to the particular situation.