

Toilet Training Setbacks

Stacy and Hal's daughter, Lindy, was toilet-trained at the early age of twenty-four months with surprisingly few of the problems her playmates eventually faced. For more than a year, she had been off diapers and using a potty. Of course, there had been some accidents, particularly during the first six months following toilet training, but fewer overall than her parents had expected.

Now that Lindy was four and attending preschool, however, a new challenge presented itself. Lindy had started "leaking" small amounts of urine once or twice a day. Her parents frequently found that her underwear was slightly damp when Lindy got home from school or when she undressed for her bath at night. It wasn't that she was having accidents—she still easily stopped what she was doing and went to the bathroom when she needed to eliminate—but she seemed to experience a certain amount of dribbling between potty sessions that she was unable to control. The dampness didn't bother Lindy, but her parents worried that a physical, developmental, or even emotional problem might be the cause.

As Lindy's situation indicates, issues relating to bladder and bowel control can arise not only during the actual toilet training process but long after parents assume that their children are fully trained. In many cases, such setbacks can be remedied with relative ease once the causes have been identified.

Medical or psychological intervention may be necessary. No matter what the reason behind your own child's problem, the earlier you address the issue, the better the chances that it will be resolved without seriously affecting your child.

Additional articles in this section of the web site will identify many of the most common problems experienced by young children who have completed toilet training, listing the most common reasons behind such behaviors, and offering general guidelines for parents to follow in correcting them.

Still, there is no substitute for the individual advice of your child's pediatrician. A conversation with, or visit to, your child's doctor is the first step in combating any disturbing or ongoing issue.

Last Updated 11/21/2015

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The information contained on this Web site should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

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