



Leicestershire Partnership
NHS Trust

Healthy Bladder, Healthy Bowel Parent/Carer Information Session



HEALTH FOR TEENS





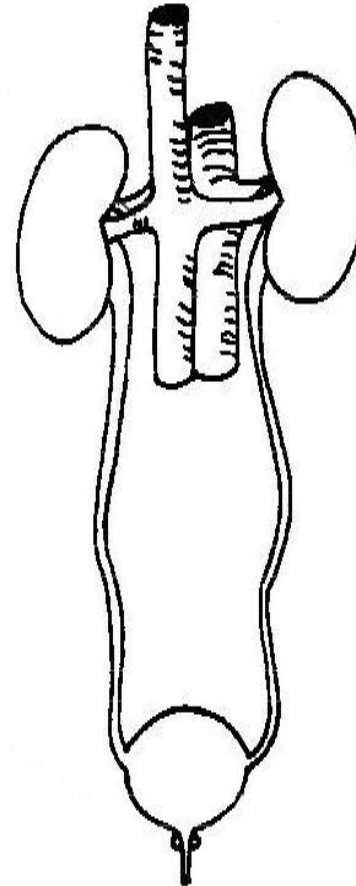
Welcome

Aim of today's session is:

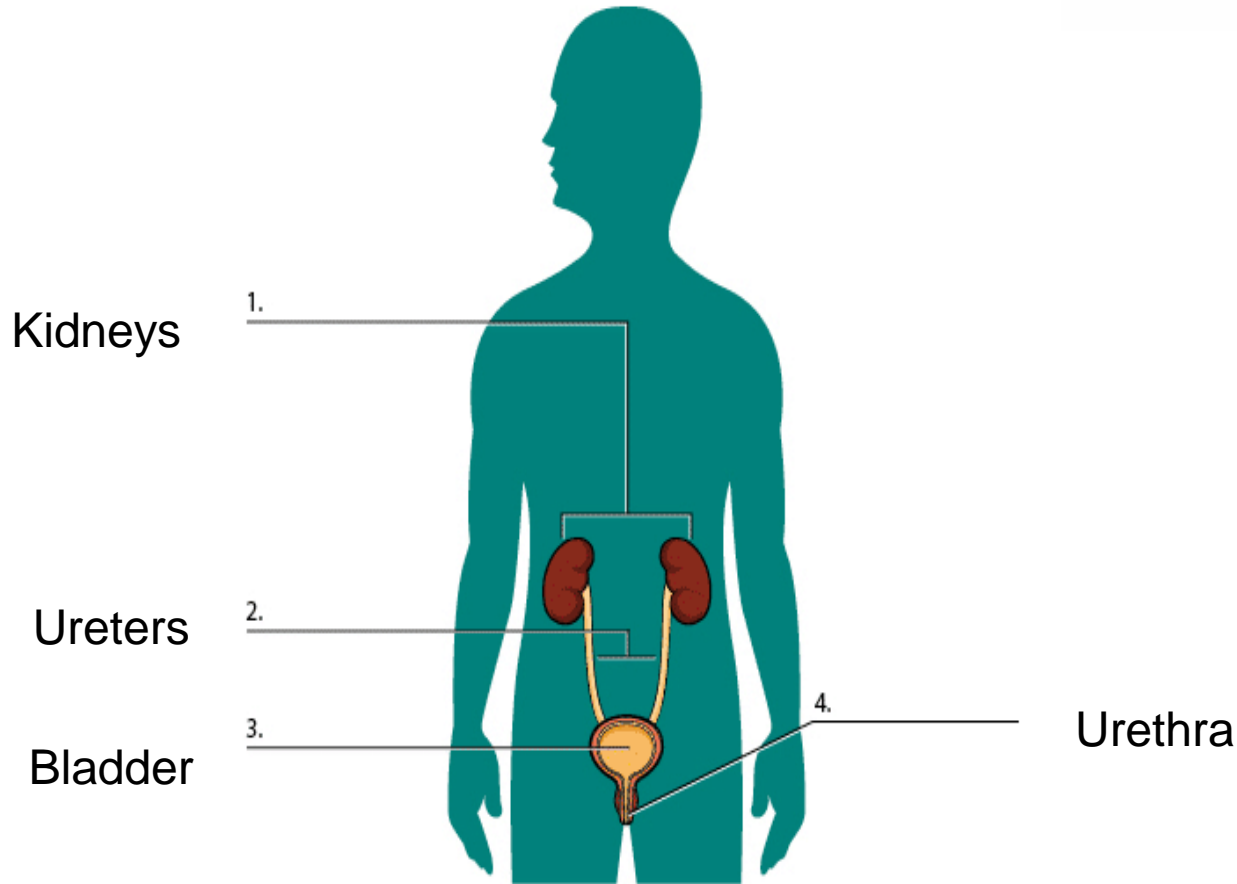
- To look at daytime, night-time wetting, constipation and soiling.
- To provide information and awareness to help you support your child.



Information on the kidneys and bladder



How the kidneys and bladder work





General information about the bladder



- Between age 2 – 3 bladders mature and children can become dry
- Urine is usually passed 6 – 8 times a day
- Urine should be pale yellow in colour
- How much the bladder holds depends on the age of the child
- Over 80% of children are dry at night by the age of 7 years

How the bladder works



www.dreamstime.com



How much a bladder can hold

Age	Bladder Capacity
5	180mls
6	210mls
7	240mls
8	270mls
9	300mls
10	330mls
11	360mls
12	390mls

Once children reach puberty the bladder capacity is calculated by body weight





Daytime Wetting

Causes



- Not drinking enough fluids regularly throughout the day
- The types of fluids consumed
- Water infections (UTI)
- Constipation
- Delay in emptying the bladder
- Overactive/twitchy bladder
- Small bladder size
- Physical/learning/sensory/medical needs



How you can help your child...





- ✓ Increase fluids gradually
- ✓ Ensure your child drinks fluids at regular intervals throughout the day. Water being the best drink!
- ✓ Avoid drinks that are dark in colour, fizzy or contain caffeine
- ✓ Encourage your child to take a drink to school – talking to your child's teacher may be helpful



- ✓ Encourage your child to go to the toilet at regular intervals throughout the day. Using a reminder may be helpful
- ✓ Encourage your child to empty their bladder fully
- ✓ See your GP to rule out any medical causes of wetting
- ✓ Avoid constipation



- ✓ Use of praise and rewards
- ✓ Put your child in easily removable clothing
- ✓ Stay calm and relaxed
- ✓ Give your child the opportunity to use the toilet when needed



Recommended Fluid Intake



Age in years	Gender	Total Fluids per day	Average Cup size (drinking min 6 cups a day)
4 – 8	Female	1000 – 1400mls	170mls – 250mls
	Male	1000 – 1400mls	170mls – 250mls
9 – 13	Female	1200 – 2100mls	200mls - 350mls
	Male	1400 – 2300mls	230mls – 390mls
14 – 18	Female	1400 – 2500mls	230mls – 420mls
	Male	2100 – 3200mls	350mls – 540mls





Night-time Wetting



What can cause night-time wetting



- Not drinking the right amount and type of fluids
- Rousability – not waking to the signal of needing to empty the bladder
- Lack of vasopressin
- Constipation
- Overactive bladder – twitchy bladder
- Hereditary



How you can help your child with night-time wetting...





- ✓ Treat day time wetting and constipation first if indicated
- ✓ Ensure your child drinks fluids at regular intervals throughout the day
- ✓ Your child should avoid drinks that are dark in colour, fizzy or contain caffeine
- ✓ Double Voiding - encourage your child to use the toilet twice before settling to sleep





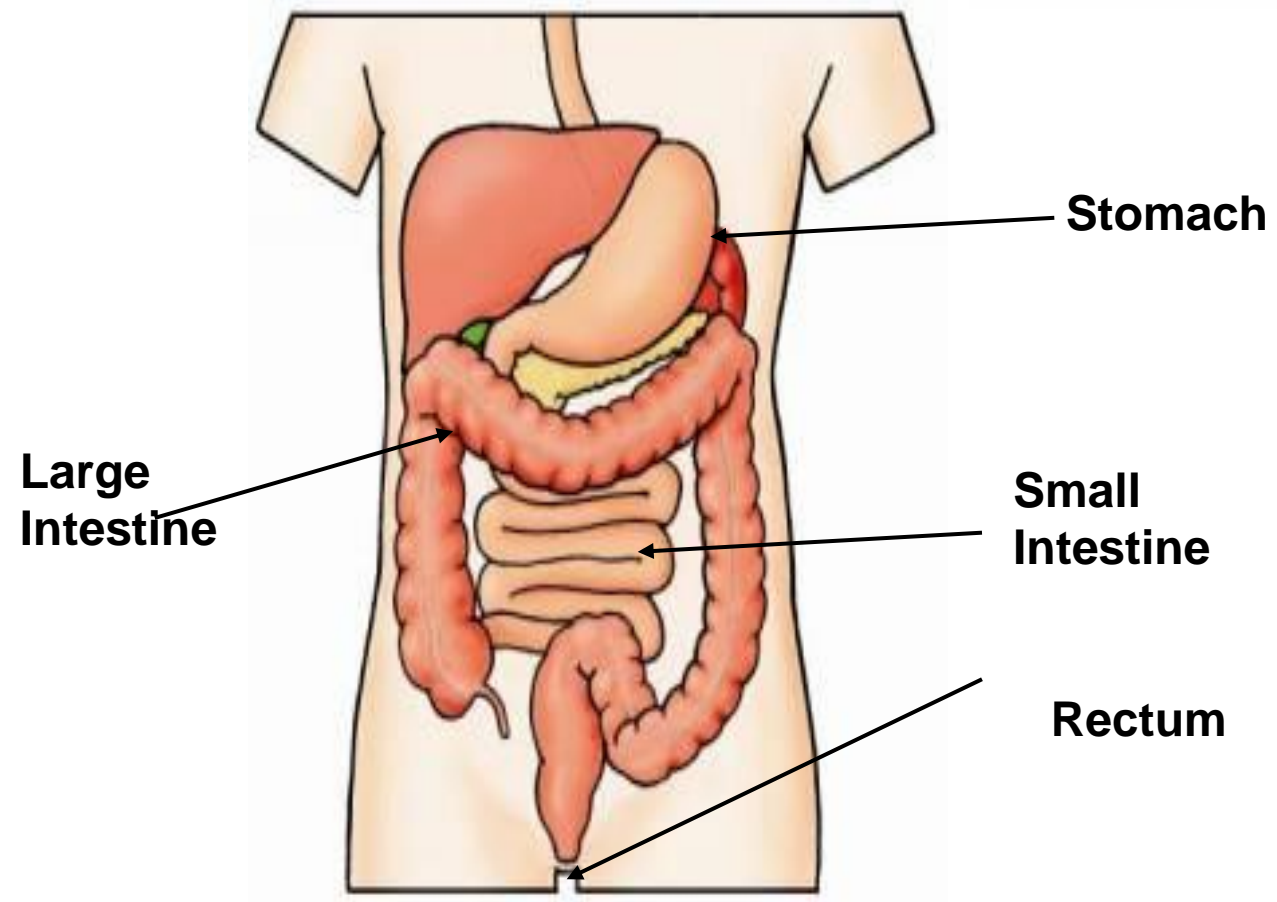
- ✓ Be mindful of access to the toilet
- ✓ Do you need a night light?
- ✓ Do not lift your child
- ✓ Encourage your child to help with changing wet bedding and clothing
- ✓ Give praise



Constipation



How the bowel works



Constipation










- Signs and symptoms of constipation are often difficult to recognise.
- Signs could include:
 - small or large hard stools
 - opening bowels less than three times a week
 - stomach pains
 - pain/straining when opening the bowels



- overflow soiling
- excessive wind
- general lethargy
- poor appetite
- disturbed sleep
- changes in behaviour
- night-time soiling

THE BRISTOL STOOL FORM SCALE (for children)

choose your POO!

type 1		looks like: rabbit droppings Separate hard lumps, like nuts (hard to pass)
type 2		looks like: bunch of grapes Sausage-shaped but lumpy
type 3		looks like: corn on cob Like a sausage but with cracks on its surface
type 4		looks like: sausage Like a sausage or snake, smooth and soft
type 5		looks like: chicken nuggets Soft blobs with clear-cut edges (passed easily)
type 6		looks like: porridge Fluffy pieces with ragged edges, a mushy stool
type 7		looks like: gravy Watery, no solid pieces ENTIRELY LIQUID

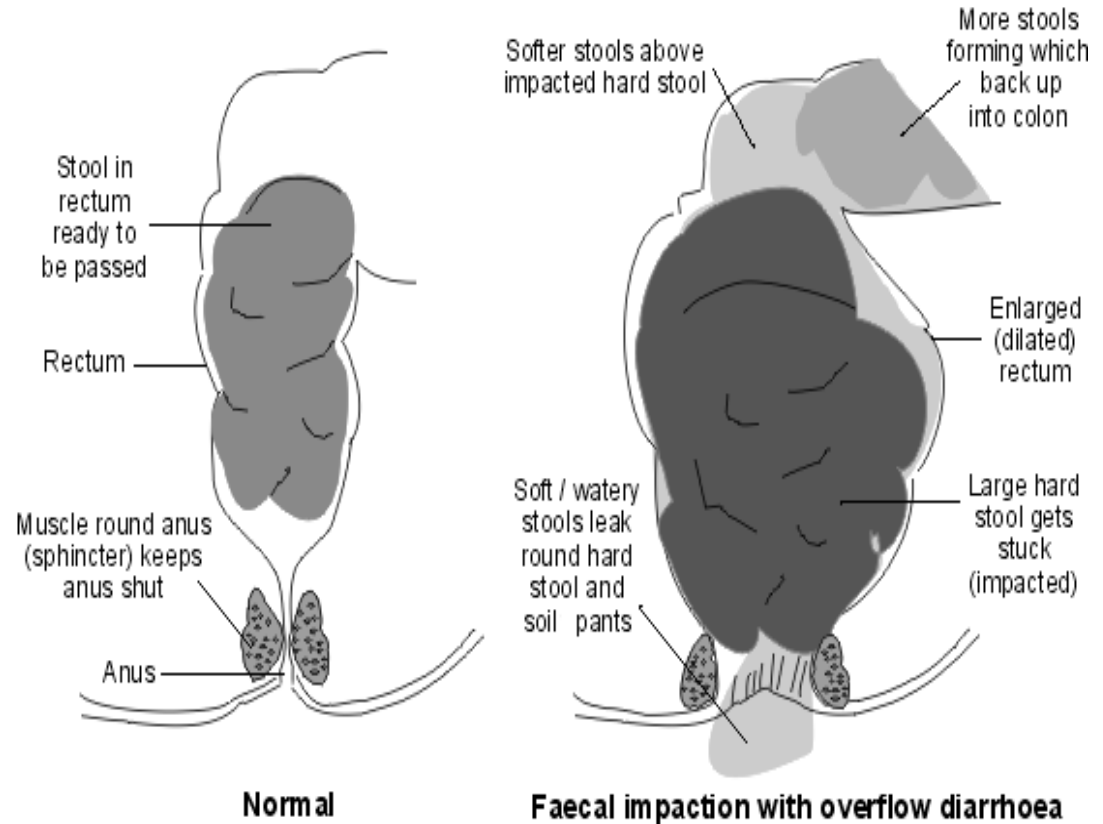
Concept by Professor OCA Candy and Emma Davies
based on the Bristol Stool Form Scale produced



Bristol Stool Chart

Which one is the ideal poo?

What happens when your child is constipated





How you can help your child with constipation...





- ✓ Encourage regular exercise
- ✓ Offer a healthy diet
- ✓ Encourage fluids
- ✓ Establish a toileting routine
- ✓ Ensure toilet area is comfortable
- ✓ Be mindful of your child's position on the toilet – do they need a foot stool and/or an insert seat?
- ✓ Remember praise and rewards



Knees higher than hips
Lean forward and put elbows on knees
Bulge abdomen
Straighten spine

Macrogols



- Macrogols are prescribed by GPs to break up hard lumps of poo and make them softer and easier to pass.
- Each sachet is mixed with 62.5mls water and should be stirred until the water is clear
- If adding flavour, ensure this is added **AFTER** the sachet has been mixed with water and turned clear



- Macrogols should be used within 24 hours of mixing with water
- They can be taken at any time of day
- If splitting doses, the full amount should be given within a 12 hour period
- A stimulant laxative is also needed by a small number of children. Talk to your GP if you think this applies to your child

Chronic Constipation



- Where a child regularly becomes constipated, they can take a maintenance dose to prevent this occurring

Child's Age	Recommended daily dose	Paediatric or Adult
1-6 years	1-4 sachets	Paediatric
6-12 years	2-4 sachets	Paediatric
12-18 years	1-2 sachets	Adult

Faecal Impaction



- If your child has faecal impaction, they may need high doses of macrogols to clear out their bowel. We call this disimpaction

Age	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
1-5 years	2	4	4	6	6	8	8
5-12 years	4	6	8	10	10	12	12
12-18 years (adult)	4	6	8	8	8	8	8



- Do not stop taking macrogols until your GP tells you to. This could be a few weeks or months down the line





Lets talk about nappies/continence products



- These can give your child permission to use them rather than the toilet
- Children may not feel wet or soiled when wearing them
- Nappies/products are not recommended for the management of night-time wetting, constipation and soiling



Next steps...

Now it's time to put the information from today into practice.





- If after 4 weeks your child still requires support please contact your local Healthy Together (School Nursing) Team to arrange further support or a clinic appointment
- If after 6 weeks we have had no contact from you it will be assumed your child's continence needs have resolved











If further support is needed from Healthy Together, you will be required to complete continence charting prior to any continence clinic assessment.

Examples of charting...











**Chart for your drinks and wees
(Please complete for 4 days)**



Day 1		Date:		Day 2		Date:	
Time	Size of drink in mls	Time	Size of wee in mls	Time	Size of drink in mls	Time	Size of wee in mls
							
		7am	200ml				
7:30am	200ml Orange juice	8am	100ml				
10am	200ml Water	10:30am	170ml				
12pm	200ml Orange squash	12:30pm	190ml				
2pm	100ml Water						
3:30pm	150ml Milk	3:40pm	170ml				
5pm	200ml Fruit shoot	5:30pm	100ml				
7pm	100ml water	7:30pm	150ml				








Baseline Assessment Chart for Nocturnal Enuresis (To be completed for 2 weeks)



							
Date	What was the last drink of the day in mls & what time?	What time did you go to bed?	What time did you go & check to see if they were wet?	When you checked were they • Wet • Dry	Did your child have a dry bed in the morning • Yes • No	If wet, what was the size of the wet patch • Small • Medium • Large	Has your child had their bowels open during the day? Please describe using the Bristol Stool Chart
1/1/22	7pm 100ml water	7:30pm	10pm	Wet	Yes	-	3
2/1/22	7:15pm 100ml Water	7:45pm	10:15pm	Dry	No	Medium	4
3/1/22	7:05pm 100ml Water	7:30pm	10pm	Wet	No	Small	4
4/1/22	7:20pm 150ml Orange squash	7:50pm	10:45pm	Wet	No	Small	3

THE BRISTOL STOOL FORM SCALE (for children)

choose your POO!

type 1		looks like rabbit droppings Separate hard lumps, like nuts (hard to pass)
type 2		looks like bunch of grapes Sausage-shaped but lumpy
type 3		looks like corn on cob Like a sausage but with cracks on its surface
type 4		looks like sausage Like a sausage or snake, smooth and soft
type 5		looks like chicken nuggets Soft blobs with clear-cut edges (passed easily)
type 6		looks like porridge Fluffy pieces with ragged edges, a mushy stool
type 7		looks like gravy Watery, no solid pieces ENTIRELY LIQUID

Copyright © Professor CGA, Curtis and Emma Davis
Creators of the Bristol Stool Form Scale published
by Dr. Hillier, Paeder 4 Medicine at the
University of Bristol
©2005 Produced by Norgine Pharmaceuticals
Limited

Bowel Record Chart








This chart is designed to give a good idea of your child's bowel habits. Please fill in the chart every day (referring to the Bristol Stool Chart)



Date	Time	Type of stool (use number from the Bristol Stool Chart)	Quantity of stool • Large • Medium • Small • None	Pain and distress when passing stool • Yes • Some • No	Where was the stool passed? • Toilet • Nappy • Other	Pants soiled?	
						Yes/No	Type of soiling • Stained • Loose • Solid
1/1/22	10am	3	L	No	Toilet	No	
2/1/22	10:30 am	4	M	No	Toilet	No	
2/1/22	5pm	3	S	Some	Pants	Yes	Solid

THE BRISTOL STOOL FORM SCALE (for children)

Choose your Poo!

type 1		looks like: rabbit droppings <small>Separate hard lumps, like nuts (hard to pass)</small>
type 2		looks like: bunch of grapes <small>Sausage-shaped but lumpy</small>
type 3		looks like: corn on cob <small>Like a sausage but with cracks on its surface</small>
type 4		looks like: sausage <small>Like a sausage or snake, smooth and soft</small>
type 5		looks like: chicken nuggets <small>Soft blobs with clear cut edges (passed easily)</small>
type 6		looks like: porridge <small>Soft blobs with clear-cut edges (passed easily)</small>
type 7		looks like: gravy <small>Watery, no solid pieces ENTIRELY LIQUID</small>



Further Sources of Information



www.eric.org.uk

www.bbuk.org.uk

www.healthforunder5s.co.uk

www.healthforkids.co.uk

www.healthforteens.co.uk

NICE Guidance

- CG111 (Enuresis)
- CG99 (Constipation)

Text Parent/Carer ChatHealth: **07520 615382 (County 0-11)**

Contact your local Healthy Together Team or your child's GP





Name of Originator/Author:	Alison Barlow
Updated by:	Katie Griffin
Date Reviewed:	February 2024

