

Busy Bladder Syndrome

Constipation refers to the character and consistency of the stool rather than the frequency of bowel movements. Stools that are small, hard, and dry characterize constipation. Children will withhold stools because of discomfort from hard stool. Stool collects in the rectum and presses on the bladder causing children to have decreased bladder capacity and therefore urine accidents. Laxatives will alleviate the pain that the child associates with stooling and give the stretched rectum time to return to normal size.

This type of laxative use will NOT cause laxative dependence.

- Milk of Magnesia _____ tsp orally at bedtime
- Miralax _____ capful in 6 ounces of fluid each day

Goal: 1-2 very soft bowel movements each day. You may need to increase or decrease the above interventions to achieve this goal.

Vaginitis/Urethritis is an inflammation of the skin of the vagina or the tip of the penis that can result in discharge, itching and pain. The cause is usually an infection or a change in the normal balance of vaginal bacteria.

- Soak in warm bath water with $\frac{1}{4}$ cup of baking soda sprinkled in.
- Avoid bubble baths, hot tubs and whirlpool spas. Rinse soap from your outer genital area after a shower/bath, and dry the area well to prevent irritation. Don't use scented or harsh soaps, such as those with deodorant or antibacterial action.
- Wipe from front to back after using the toilet. Doing so avoids spreading fecal bacteria to your vagina.
- Wear cotton and loose fitting clothing.
- Do not wear underwear to bed.

Retrain the Bladder

- Timed Voids – the children needs to forget what it feels like to have a full bladder for a couple of days and feel successful that they can stay dry. The best way to do this is to void by the clock for several days. Initially take your child to urinate every 2 hours for 2 days, then space it out to every 3 hours for 2 days, then every 4 hours for 2 days. Finally, allow your child to determine the need to void.
- Void in 2 positions – this allows the child to completely empty the bladder.
 - Boys – void standing and then sitting
 - Girls – void sitting, then straddling the toilet/facing the wall.