

Bladder and Bowel Dysfunction

BBD



Are there other helpful hints for managing BBD?

Constipation

- Have the child sit on the toilet after meals, with feet supported on a stool and legs relaxed (not held together). Have the child sit toward the back of the toilet seat.
- Sitting time should be close to 1 minute per year of age.
- Use a booster toilet seat or potty if your child cannot relax on the adult toilet.
- If none of these strategies work, talk to your child's doctor about a stool softener.



Bladder Problems

- Have your child urinate every 2 hours (timed voiding).
- When your child finishes urinating, have him or her go again (double voiding).
- Avoid the "5Cs": caffeine, chocolate, citrus, carbonation (soda pop), and food coloring.
- Use a reward system: Special reward when your child is dry.

For more information about BBD

- Contact the UTI Center at Children's Hospital of Pittsburgh of UPMC 412-692-UTIS (8847).

What is Bladder and Bowel Dysfunction (BBD)?

- BBD describes problems with both bowel and bladder function.
- Problems with bowel function usually present as constipation.
- Problems with bladder function usually present as daytime wetting, needing to urinate often and feeling the urge to "run" to the bathroom.
- Because the bladder and bowel share the same nerves, children with constipation also often have bladder dysfunction.



Why is it important to diagnose BBD?

- Long-standing BBD affects the muscles and nerves that control normal bowel and bladder function so that the child no longer feels the need to go.
- BBD increases the risk for urinary tract infection (UTI).
- Vesicoureteral reflux (VUR) is the back flow of urine toward the kidneys. VUR is more difficult to treat in a child with BBD.

BBD increases the risk for urinary infections.

What are the signs and symptoms of BBD?

Signs of Bladder Problems

- Urgency: having to “run” to the bathroom, short “warning” period (leaks on way to bathroom)
- Hesitancy: starting and stopping their stream of urine
- Pain or burning with urination
- Crossing the legs or squatting
- Doing “pee dance”
- Infrequent (1 to 3 times per day) or frequent (more than 6 times) urination
- Incontinence (wet/damp underwear)
- Frequent UTIs

35 to 50 percent of children with urinary reflux have voiding dysfunction.



Signs of Constipation

- Constipation is defined as having: less than 3 bowel movements per week, passing large stools that block the toilet, or pain when trying to go to the bathroom.
- Abdominal pain/back pain
 - Belly may look bloated
 - Child may soil underwear with liquid or soft stool

How is BBD treated?

Most importantly, treat the constipation with good nutrition.



- **Increase fluids** — 4 to 6 cups of water for older children, and 2 to 4 ounces of pear, peach, or prune juice for infants.
- **Increase fiber** — Good sources of fiber include: vegetables such as beans, corn, sweet potatoes, raw unpeeled fruit, bran cereals, graham crackers, whole wheat breads and vegetable soups. Children should have 2 servings of fruit, 2 servings of vegetables, and 2 to 4 servings of bread or dry cereal every day.
- If the above have been tried without success, the doctor may need to prescribe a stool softener or a laxative to allow the child to have daily bowel movements.

