**INTRODUCTION**

*Background and Rationale*

- Approximately 1.5% of 7-year-old children have had symptoms of encopresis (Levine, 1983).
- Children who are diagnosed with encopresis often have a history of chronic constipation and over time, may learn to withhold their stool to avoid painful bowel movements.
- Primary Care Physicians frequently prescribe stool softeners, such as Miralax, to facilitate passing stool comfortably.
- However, children often continue to associate past experience of painful bowel movements with current toileting and refuse to comply with recommendations necessary to resolve encopresis.
- Intervening with dietary management and stool softeners alone is often insufficient in treating encopresis (Van Dijk et al., 2007).

**Approaching encopresis comprehensively is essential in effectively evaluating and treating encopresis.**

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**METHOD**

**Assessment**

- Parents
  - Wait for Gabe to defecate on his own. If unprompted will wait up to 7 days.
  - Monitor Gabe’s toileting
  - Enema procedure (1-2 times per week).
  - Rewards: Earn a reward after a week of clean underwear and having a daily bowel movement – no rewards were earned.
- Primary Care Physician
  - Kindergarten physical: History of withholding stool and soiling was noted. Colitis was prescribed.
  - 8-year-old check-up: Recommended increasing fruit and vegetables and prescribed Miralax, daily toilet sits, and physical therapist for bowel training.
  - 8-year-old follow-up: Normal abdominal ultrasound.
- Physical Therapy
  - Pelvic floor coordination training
  - Pelvic floor strengthening
  - Daily toilet sits
  - In response to poor compliance, had Gabe “recomm” to the program.

**Design**

- Single-subject AB design was utilized to evaluate the effects of clinic intervention on constipation and soiling.
- Independent variable – clinic intervention.
- Dependent variable – soiling and defecation in the toilet.

**Procedures**

<table>
<thead>
<tr>
<th>Baseline Data</th>
<th>Diet Diary</th>
<th>Stool Record</th>
<th>Behavior Assessment System for Children (BASC), parent and teacher</th>
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**Clinic Recommendations**

- Increase fiber and limit dairy
  - Goal: Decrease constipation and increase comfortable bowel movements.
- Natural Consequences
  - Goal: Compliance with morning routine.
  - Gabe was provided a 5-minute warning prior to having milk poured on his cold cereal for breakfast.
- Backwards Chaining
  - Goal: Compliance with morning routine
  - Gabe was provided assistance with dressing himself, however he was required to put on his clothes following his last article of clothing (e.g., sock) independently prior to eating breakfast.
- Reward toilet sits and toilet productivity
  - Goal: Compliance with toilet sits and increased toilet productivity.
  - Gabe was rewarded with 5 minutes of Gameboy for complying with a toilet sit and 10-20 minutes of Gameboy for having a bowel movement in the toilet.

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**REFERENCES**

Van Dijk, M., Benninga, MA, Grootenhuis, MA, Nieuwenhuizen, AM, Last, BF. (2007),