OsmoLax[®] Relief



What is constipation?

Constipation is when a child has a hard bowel movement (poo) or goes to the toilet less regularly than normal, or feels pain or straining when having a poo.

But, what is normal? This will depend on how old your child is and what they eat.
During the first three months of life, infants will have around three soft bowel movements (or poos) per day.
As they get older, the number of poos will decrease. By two years of age, most children will have at least one bowel movement per day and these are soft, but solid. However, this will vary from child to child and you only need to think about constipation if it seems that passing a poo is causing a problem or discomfort for your child.

Signs that your child may be constipated

- · Poos are hard, dry and look like nuts
- Pains in the belly or bottom
- Pain when passing a poo
- Leaks small watery poos into the underwear (soiling), if he or she is already toilet trained
- Avoiding going to toilet or hiding and doing unusual movements such as rocking backwards and forwards while stiffening their bum and legs, or they may squat or get into an unusual position. These movements may look like your child is trying to have a poo, but it is often the opposite and they may be trying to avoid doing a poo for fear that it is going to hurt
- Another way to see if your child is constipated is to look at their poos and compare them to the Poo Chart (opposite). Poos that look like small, hard nuts or like a lumpy sausage (types 1 or 2) are signs that your child is constipated

Poo Chart (Bristol stool form scale)

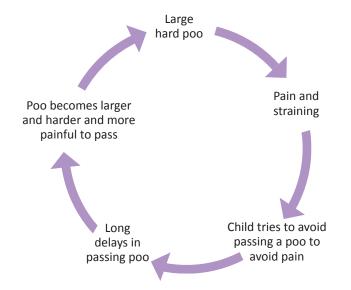
Туре	Description	Adjusting OsmoLax Relief dosing*	7-020-024
1	Separate hard lumps, like nuts (hard to pass)	▲ Increase the dose	Benordured with nermission from Taylor & Francis Itd Towis ST. Heaton KW. Strol form scale as a useful guide to intestinal transit time. Scand I Gastroenterol 1997-37-970-974
2	Sausage-shaped but lumpy	▲ Increase the dose	Hinal transit time Scand
3	Sausage-shaped, but with cracks on the surface	No change, continue the current dose	se a neafin anida to intest
4	Like a sausage or snake, smooth and soft	No change, continue the current dose	s aleas was form crale
5	Soft blobs with clear-cut edges	▼ Decrease the dose	ancie I to Lawis SI Haat
6	Fluffy pieces with ragged edges, a mushy poo	▼ Decrease the dose	niccion from Taylor 8, Er
7	Looks watery, no solid pieces	Stop taking OsmoLax Relief for 1–2 days. If required, restart at a lower dose	Reproduced with pers

^{*}The dose of OsmoLax Relief can be adjusted (up or down) every 2 to 3 days until your child is having one or two soft poos (types 3 or 4 in the Poo Chart above) each day. See your healthcare professional for further advice. Do not exceed the maximum dose per day.

Why does constipation develop?

Constipation can occur at any time, after a change in diet or a change in the child's environment. For some children, it occurs because they ignore the urge to have a poo because they are too busy playing. If this happens often, the brain starts ignoring these urges and soon your child may not be aware that there is a poo to pass. This then leads to a gradual build-up of poo that becomes dry, hard and difficult to pass. Some children will hold back (also called 'withholding') from passing a poo as they have previously felt pain when doing so. This can form a nasty cycle, as when the child eventually passes the poo it is larger, dry and causes more pain, which causes more fear of passing a poo and the nasty cycle continues.

The nasty cycle of pain and withholding and worsening constipation



Times when constipation is more likely to develop

There are three stages of the child's development when constipation is more likely to develop: when they first start eating solids (cereals and puréed foods), during toilet training and after starting school.

Infants: If your child is younger than 12 months, you should take your child to the doctor if they are constipated.

Toilet training: If your child develops constipation during toilet training, it could be that they are not ready or interested yet in using the toilet. If they have also experienced pain when passing a poo, they may start withholding (avoiding passing a poo) to avoid more pain. In this instance, you may want to temporarily stop toilet training while you treat the constipation, and you should discuss this with your healthcare professional.

Starting school: Some children do not want to use the bathroom at school as it is unfamiliar or is 'too public' and this can lead to withholding. Often your child will not raise this problem with you, but they may become constipated and soil their pants. If your child has constipation for an extended period of time, the muscles in the bottom (rectum) can become stretched and your child may lose the ability to feel the urge to go and pass a poo. Soiling is due to overflow diarrhoea, where small amounts of poo squeeze past the large hard poos and leak out of the anus. If your child develops constipation or starts soiling themselves around this time in their life, treat the constipation, monitor how often they pass a poo at home and ask about what happens at school. Then if you think there is an issue at school, raise it to see how it can be addressed. You can also try eating breakfast earlier to give your child time to pass a poo before they leave for school.

Help relieve constipation with OsmoLax Relief

OsmoLax Relief can be used in children 4 years and above. OsmoLax Relief works to relieve constipation by helping to restore the body's natural rhythm. It does this by increasing the amount of water held in the bowel to soften hard poos, make them easier to pass and helps them get passed more regularly.

As **OsmoLax Relief** is virtually taste-free and contains no flavours, salts or sugars, it can be mixed with your child's favourite drink (hot or cold). This generally makes it easier for them to drink it than some other laxatives.

How long does it take to work?

Because of its hydrating action, it is likely to take 1 to 3 days before your child starts passing softer poos. After this, you can expect your child to have more regular, softer poos.

How do you take OsmoLax Relief?

Add **OsmoLax Relief** powder to any drink that your child likes (hot or cold), such as water, cordial or juice. Simply add the recommended amount of powder based on your child's age and stir until it dissolves and then your child drinks the **OsmoLax Relief**. If needed you can store the prepared **OsmoLax Relief** in the fridge for up to 6 hours.

How long does my child take OsmoLax Relief for?

OsmoLax Relief generally produces results in 1 to 3 days and can be taken until the body's natural rhythm is restored. If symptoms persist see your healthcare professional. For dosage instructions and directions for use, please follow the instructions on the pack.



What is the best starting dose?

The dose of **OsmoLax Relief** is based on your child's age. The **OsmoLax Relief** Children's Pack comes with an 8.5 gram dose small scoop.

Small scoop (8.5 g) -

OsmoLax Relief dosing

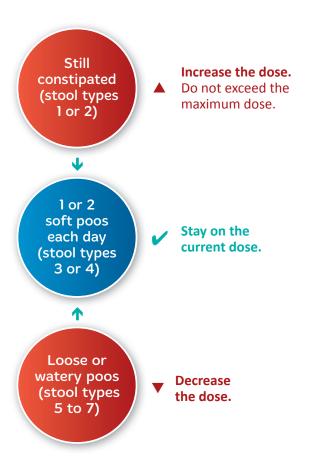
Age	Usual starting dose per day	Mixed with	Maximum daily dose		
12 years and over	2 small scoops (17g)	1 cup (240mL)	4 small scoops (34g) mixed with 2 cups of liquid (480 mL)		
6 to 12 years	2 small scoops (17g)	1 cup (240 mL)	3 small scoops (25.5g) mixed with 1½ cups of liquid (360 mL)		
4 to 5 years	1 small scoop (8.5g)	½ cup (120mL)	2 small scoops (17g) mixed with 1 cup of liquid (240mL)		



When and how do I adjust the dose of OsmoLax Relief?

OsmoLax Relief generally produces results in 1 to 3 days. The dose of OsmoLax Relief can be adjusted (up or down) every 2 to 3 days until your child is having one or two soft poos each day. (See the Poo Chart on page 3 to help you adjust the dose of OsmoLax Relief.)

Adjusting the dose of OsmoLax Relief



What else can I do?

- Keep a poo diary: Keeping a record of your child's poos can help your doctor or nurse better understand and manage your child's constipation (see the **Poo Diary**, pages 10 and 11).
- Regular toilet sitting: It is important that children with constipation develop the habit of regularly sitting on the toilet. The best time to go to the toilet is after eating a meal, as the act of eating will start movement within the whole gastrointestinal tract.

Encourage your child to sit on the toilet (for 3 to 5 minutes) within half an hour of eating breakfast and/or dinner.

Provide a footstool that your child can place their feet on to feel stable and secure while sitting on the toilet. You may want to give them a book or cartoon to read, to help pass the time. Use a timer to avoid arguments about sitting times.

Rewards can be helpful for your child to encourage sitting on the toilet (he or she does not have to pass a poo to receive a reward). For pre-schoolers, try stickers or a song as a reward. For older children, it may be doing an activity book or computer time. Feel free to download and print out the OsmoLax Relief colouring-in chart on the website at www.OsmoLaxRelief.com.au.

• Healthy diet: Increasing fibre gradually and fluids in your child's diet can help prevent constipation in some cases. However, for a child with repeated constipation, drinking extra fluids and eating a high-fibre diet are often not enough to relieve constipation and a laxative may be needed, such as OsmoLax Relief.

You can add more fibre into your child's diet with:

- 2 serves of fruit each day (leaving the skin on)
- 3 serves of vegetables each day
- · high fibre cereals such as brans, oats, whole grains
- wholemeal or grainy breads or white bread with added fibre.



Comments (add any other comments, e.g. pain or straining with poo, poo type 1 to 7)									
OsmoLax Relief dose (number of scoops)									
Tick (🗸) if no soiling today (only for toilet-trained children)									
Poos outside of sitting time (add ★ for passing a poo)									
Toilet sitting: Add ✓ for toilet sitting and ★ for passing a poo	Evening								ements):
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More information

For more information, please call 1800 653 373 or visit www.OsmoLaxRelief.com.au

Always read the label. Use only as directed and consult your healthcare professional if symptoms persist.



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