EVALUATING THE MANAGEMENT OF IDIOPATHIC CONSTIPATION AMONG SECONDARY CARE PAEDIATRICIANS IN WALES

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Background Constipation is a very common paediatric presentation, with an estimated prevalence of 30% among school-aged children in the UK. According to NICE guidance, the diagnosis of idiopathic constipation can usually be established by performing a thorough clinical assessment, using amber and red flags to rule out serious underlying causes. Our study is aimed at establishing whether this guideline is adequately used by Paediatricians.

Methods A 10-question survey was sent out to Paediatric Consultants, Specialty doctors, Paediatric trainees and GP trainees working in Paediatrics. The questions were aimed at assessing respondents’ knowledge of the NICE recommendations. To contextualise this, clinicians were also asked whether they had experience of and felt confident in treating constipation, and whether specific facilities were available in their department.

Results Data from 23 respondents was analysed. The majority of these (60.9%) were Paediatric Registrars; 30.4% were a combination of GP trainees, Paediatric SHOs and Specialty doctors, and 8.7% were Consultant Paediatricians. Faltering growth was correctly identified as an amber flag by 65.2% of respondents, whilst only 47.3% identified possible child maltreatment as one.

All clinicians correctly identified neonatal onset of constipation as a red flag, but only 73.9% and 52.2% were able to identify abdominal distension with vomiting and ribbon stools, respectively, as red flags. 39.1% of respondents stated that they would not routinely investigate idiopathic constipation, whilst up to 56.5% would perform a coeliac screen. 69.6% stated they would never perform a digital rectal examination. 43.5% correctly identified the recommended pathway for treatment and 52.2% correctly identified the referral criteria. Whilst clinicians felt, on average, moderately confident in managing patients with constipation, up to 56.5% did not have specific facilities in their department.

Conclusion While most respondents correctly identified amber and red flags, and were reasonably familiar with management recommendations, the majority of clinicians would investigate constipation – which NICE does not routinely recommend. These findings suggest that further targeted education, as well as specialist resources, may improve clinicians’ knowledge and confidence in managing this condition and also illustrates guideline fatigue.