



Aberdeen Royal Hospitals

ROYAL ABERDEEN CHILDREN'S HOSPITAL
CORNHILL ROAD
ABERDEEN



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DEPARTMENT OF CHILD AND FAMILY PSYCHIATRY

14 JANUARY 1998

DDC/AC

CONFIDENTIAL

Mr George Youngson
Consultant in Surgery
Department of Surgical Paediatrics
RACH

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Records Please			
File			
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Normal			
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To Phone Doctor			
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Dear Mr Youngson

Re: Lee Reid {10:5:92}, 14 Lintmill Terrace, Aberdeen

19 JAN 1998

Thank you for referring this boy. I saw Lee and his mother at this department on 22 December 1997. Mother said that Lee had not had a bowel movement for 3 weeks and that that was a frequent occurrence. She described how he had had problems over defecation since he was a baby. I obtained a history of him having an anal fissure. She indicated that the only time he had used a WC for defecation had been in hospital and immediately after discharge. She described a pattern of alternating periods of frequent soiling and periods of retaining. The soiling is always in his pants. She said that he passed fresh blood and mucus on occasion. There had been a good response to using a star chart but its use had not been persisted with. There has never been any mention of soiling at school but he is soiled by the time he arrives home. Mother said that she had tried taking him to the toilet and sitting with him, or cuddling him there but without success. She had also got annoyed with him about his soiling. There is no enuresis. Lee tends to eat quite a restricted diet that is probably low in roughage. He will not take school lunches. The family lived with maternal grandmother until April 1997. Mother mainly dealt with Lee while maternal grandmother dealt with his 8 year old sister, Both and Lee stay with mother in their own house now but maternal grandmother is still particularly involved with For many years, Lee has not had contact with his father who, mother says, drank excessively. Mother had a live-in boyfriend until a couple of months ago but they broke up after arguments which Lee would have been aware of. Lee got on well with him. Mother described herself as "having a short fuse" which led to rows with her boyfriend and with although not with Lee. Lee volunteered at this point

that he had to do things that did not do and mother has found herself feeling that she has to give more attention to than to Lee. Mother said she was on anti-depressants currently.

Opinion

This boy is showing a picture of constipation and encopresis of long standing. It is likely than anxiety about defecation which has been painful at times has played a part in this. Although there is clearly a close and warm relationship between Lee and his mother it is probably relevant that from her own account she is subject to being short tempered and depressed (I noted her to be quite sharp with Lee at times during the interview). In addition, his sister tends to be more outgoing and demanding of attention. Lee's diet is probably also lacking in fibre.

Management

I discussed with mother that it is likely that his soiling will only stop once he has established a more satisfactory bowel habit and that, at this stage, the focus was required to be towards encouraging more regular bowel movements irrespective of whether they are in the WC. A chart with stickers for bowel movements was also introduced. I have also started him on lactulose 5 mls twice daily in addition to his senna and discussed the value of fibre in his diet with Lee and mother. I arranged to see him again but the first follow up appointment was not kept and I have written to them again.

Yours sincerely



D D Chisholm
Consultant Psychiatrist

cc Dr A Fraser, Denburn Health Centre