



Loose Stools

Children and adults often experience loose stools together with abdominal cramping and pain. Infants often can have ongoing loose, offensive stools that some health professionals

dismiss as “just being toddlers diarrhoea”. In the mean time parents have to deal with loose offensive stools that are often not contained by the child’s nappy.

It is normal to have a bowel movement one to three times a day provided the stool is formed and does not generally contain undigested food particles. Children will occasionally have diarrhoea that passes within a few days. Stools that are constantly, loose, malodorous and watery are not normal. Interestingly, diarrhoea also occurs more frequently at times when there is a urinary tract or respiratory infection. Loose stools may cause micro trauma to the lining of the digestive tract, creating inflammation and a reduction in digestive enzymes. See Gastrointestinal issues in ASD Children—The Research and Carbohydrate Malabsorption for more details.

Some possible causes of loose stools

- ◆ Food intolerance
- ◆ Celiac disease
- ◆ Inflammatory bowel disease
- ◆ Ongoing inflammation post gastroenteritis
- ◆ Parasitic infections
- ◆ Pathogenic bacteria
- ◆ Long-term after-effects of antibiotics
- ◆ Irritable bowel syndrome
- ◆ Helminth infection (Worms)
- ◆ Intestinal parasites
- ◆ Digestive enzyme insufficiency
- ◆ Bacterial bowel overgrowth



Red Flags

- × There is blood in the stools
 - × If there is a fever
 - × If there is severe abdominal or rectal pain
 - × If there is dehydration: dry mouth or wrinkled skin or urination is reduced or stops in any 8-hour period
 - × If an infant has a dry nappy for more than four hours accompanied by a fever
- Seek prompt medical attention if any of the above apply.

The best way to take the guess work out of what may be the problem in the bowel, is to do a **Comprehensive Digestive Stool Analysis (CDSA)**. At least this way you know what is actually going on in the bowels and how to target treatment most effectively. Refer to the CDSA test in the Health Tests section for examples of what the test can detect.

Treatment of loose stools is beyond the scope of this page as there are so many possibilities. Until a clearer clinical and medical history can be obtained or some testing is performed, you are “shooting in the dark” so to speak. For suspected coeliac disease and inflammatory bowel disease, appropriate testing should be performed and colonoscopy with biopsy for confirmation.

Loose stools may create micro trauma to the bowel wall, therefore consideration should be given to doing a **Intestinal Permeability Test** (“leaky gut”) and repair if the test is positive.