

The M.O.P. Encopresis Algorithm

For children with poop accidents but no enuresis (day or night wetting)

MILD-MODERATE ENCOPRESIS

[poop accidents/smears less than daily]

FIRST 30 DAYS: Standard M.O.P.

No osmotic first 2 weeks, then optional.

IF ACCIDENTS STOP + RELIABLE SP [SPONTANEOUS POOPING]:

- Begin Standard Taper + osmotic to ensure daily SP.

TAPER OFF OSMOTIC AFTER 6-12 MONTHS.

- Stay vigilant for signs of refilling. Use enema as needed.
- If accidents recur, restart M.O.P. with Slow Taper.

IF ACCIDENTS STOP BUT INFREQUENT SP:

- Begin 3:1 or 2:1 Slow Taper. To ensure daily SP, add osmotic or [for strong withholding] senna on no-enema days.

WHEN TAPERED OFF ENEMAS, TAPER OFF SENNA.

- Maintain osmotic 6-12 months.

TAPER OFF OSMOTIC.

- Senna or enema as needed.

IF ACCIDENTS/SMEARS DIMINISH BUT PERSIST:

- Implement Multi-M.O.P., adding osmotic in Phase 2.

IN PHASE 3, START 3:1 SLOW TAPER.

- If no SP on off days, use senna.
- Maintain daily osmotic.

WHEN TAPERED OFF ENEMAS, TAPER OFF SENNA.

- Maintain osmotic for 1 year.

TAPER OFF OSMOTIC.

- Senna or enema as needed.

SEVERE ENCOPRESIS

[accidents at least daily]

FIRST 30 DAYS: Multi-M.O.P.

No osmotic unless persistent hard stool.

IF ACCIDENTS STOP:

- Drop to 1 enema/day.
- Add osmotic.

AFTER 30 DAYS, START STANDARD OR SLOW TAPER.

- Senna on no-enema days.

WHEN TAPERED OFF ENEMAS, TAPER OFF SENNA.

- Maintain osmotic for 1 year.

TAPER OFF OSMOTIC.

- Senna or enema as needed.

IF ACCIDENTS PERSIST:

- Follow J-M.O.P. till accident-free 4 weeks.

DROP OIL, USE GWE OR LGS 2X/DAY FOR 30 DAYS.

DROP TO 1 ENEMA/DAY FOR 30 DAYS.

- Add osmotic.

START 3:1 OR 2:1 SLOW TAPER.

- Senna on no-enema days.

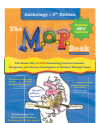
TAPER OFF SENNA. OSMOTIC 1 YEAR.

TAPER OFF OSMOTIC.

- Senna or enema as needed.

FOR FECAL IMPACTION [PER X-RAY]

- Follow Double M.O.P. or J-M.O.P. [protocols with overnight oil enemas]



Details for all M.O.P. protocols can be found in the M.O.P. Anthology 5th Edition.

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