



Potty training

Schools of thought differ as to starting age

BY JEAN-FRANÇOIS LEMAY, MD

Toddlers today finish their toilet training much later than in preceding generations. Reasons include the ready availability of disposable diapers, making parents' lives much easier and children who don't feel wet and uncomfortable. There's very little empirical data, however, to guide primary care physicians in making evidence-based recommendations. There are two basic approaches. One is based on Pavlovian principles: parents place the infant on the potty, even before age one year, at bedtime, after eating, and whenever there are signs of an impending elimination. This method, called elimination communication, is now undergoing a resurgence. The other approach is based on an Eriksonian model: training starts when the child is developmentally ready, i.e. after 18 months of age, and the pace is set by the toddler. This is the method favoured by Dr. T. Brazelton and many other healthcare professionals, though it results in toilet training completion at a much later age.

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Disposable training pants

- literature contradictory
- nighttime control often lags behind daytime achievement, so use at night and when parents are out/absent for a period of time
- switch to regular underwear when training pants stay dry for a few days

Stats

Age to begin

- 1950s: 100% started 12-21 months of age
- 1970s: 95% started < 24 months
- 1980s: 75% started before 27-29 months
- 1990s: 65% started before 30-34 months
- like many childhood milestones, readiness to use the potty doesn't correspond to a definitive age

Prevalence of continence

- day — 50% by age 2½ years, 90% by age 4
- night — 66% by age 3 yrs, 75% age 4, 90% age 8, 98% ages 12-14

When to start

- summer — less clothing
- any season if child is showing developmental readiness
- not:
 - when travelling
 - at the time of birth of a sibling
 - when changing from the crib to the bed
 - during a move to a new house
 - when the child is sick
- temporary setbacks, i.e. regressions, refusals, may occur at times of stress

Developmental readiness

Child has acquired the following skills:

- language — 2-step commands; 2-word phrases
- cognitive — initiates actions; understands cause and effect
- emotional — desires to please; diminishes oppositional behaviour; shows an interest in imitating others in the bathroom
- autonomy/independence — exhibits self-care, pride, positiveness
- motor — undresses independently; can sit for 5 mins; urinary/anal sphincter control
- bowel movements — on a fairly predictable schedule
- urination — longer periods with a dry diaper
- body awareness — notices wet or soiled diaper; manifests signs or urges to void or defecate

Basic techniques

Parents should:

- proceed slowly, take signals from child
- allow toddler active participation, control and independence
- use simple and straightforward words, like poop, pee, etc.
- refrain from negative words like stinky or dirty
- never pressure or force a child
- praise every step in the right direction
- set habits — put child gently on potty or toilet before going out, before bedtime, upon arising from sleep or nap — an empty bladder diminishes the need to void while outdoors on an activity or in bed while asleep, reducing accidents and awakenings during the night
- stay positive — lots of praise works better than punishment, criticism or shaming

Recommended reading:

American Academy of Pediatrics: www.aap.org
 Canadian Paediatric Society: www.cps.ca
 KidsHealth (Nemours Foundation): www.kidshealth.org
 Cole J. Parents Book of Toilet Teaching. Random House of Canada Ltd., 1983.
 Rogers F. Going to the Potty. Puffin, U.S., reprint 2002 — for children
 Ross T. I Want my Potty. 1986 — also for kids

Stool toileting refusal

- as many as 1 in 5 go through a period of refusal — of these, one-fourth will require intervention
- associated complications
 - late toilet training
 - higher incidence of stool-withholding, needing physician intervention
 - more encopresis, i.e. soiling
- reasons for non-compliance
 - constipation
 - fear of the toilet or of being alone in the bathroom
 - a way of getting extra attention
 - control
 - reluctance to stop playing and go to the toilet
- evidence-based intervention
 - trial: avoidance of negative terms for feces and, before training began, praise on defecation in the diaper
 - result: didn't decrease the incidence of stool toileting refusal but did shorten the time it was present
 - inquire about withholding behaviours, especially in children who don't achieve early bowel control

Time investment

- toilet training may take 3-6 months
- parents must be patient and supportive
- accidents will happen — wetting at night is common until age 5 years
- no punishment if child has an accident
- if training requires > 6 months, discuss with parents and clinicians
- if previously potty-trained child has significant toilet problems or regression, rule out gastrointestinal problems (e.g. constipation, encopresis), urinary tract infection, diabetes, etc., and do a complete physical examination
- most likely reason child hasn't learned to use the potty — not yet ready