

Case Studies

Meet Wilson

One evening after bath time, Wilson's mum, Amy, caught Wilson peeing as he was getting out of the bath. From the grin on his face, Amy realised that for Wilson this was a new sensation. Wilson was nearly three years old and up until that point Amy had never considered toilet training. She had assumed that he didn't have the potential. This realisation sparked in them the need to consider and learn more about toilet training.

Wilson has cerebral palsy (GMFCS IV) and had a history of constipation which required him to take laxatives daily. While Wilson had developed head control and could speak a few words, he wasn't yet able to sit independently, roll or self-mobilise and required equipment for seating, standing, and bathing. Although the family had plenty of contact with various health professionals, none of them had ever discussed toileting.



Amy, however, had prior experience of training Wilson's bigger sister and suddenly thought "**Why not Wilson?**". She spoke to Wilson's OT, who seemed surprised but happy to support. Amy followed a similar approach to the one her daughter. This involved getting Wilson out of nappies and using routine visits to the toilet. Initially nothing much was happening until one day Wilson was sitting on a puppy pad and Amy noticed he was squirming around. He was wet, and importantly, he could feel the discomfort. This encouraged Amy to build up the foundational skills required to toilet train. They focussed on these 4 key areas:

Social – The first step was to motivate and engage Wilson. Future rewards were replaced with immediate and generous praise for his progress - accidental or otherwise. In addition, his whole social circle including school, used consistent language, and developed common routines.

Cognition – The next step was to develop Wilson’s understanding of the toileting process by working on sequencing and mimicking. His GottaGo was colourfully decorated, and rather than taking Wilson to the toilet, Wilson started taking everyone else to the toilet. They had to copy him, Dad included.

Sensory – Building on the puppy pad incident, the family used elimination schedules to help catch him in the act of peeing. This developed his sensory awareness and allowed Wilson to make the association with the sensation of peeing and the act. The squat posture, achieved with the GottaGo, helped ease the discomfort of poeing.

Physical – Games, such as throwing and catching and blowing bubbles were used to strengthen his muscles and increase intra-abdominal pressure which encouraged him to go.

The family used routines to predict when he was most likely to pee, for

example, before meals. Another key moment came when the GottaGo was moved in front of the TV and Amy caught Wilson peeing again. With an enthusiastic **“You’re weeing, you’re weeing!”** and a surprised look on Wilson’s face, the connection between the sensation and the act was reinforced. Amy changed her language from **“Shall we try?”**, which often elicited a **“No!”**, to **“We’re going to try”**, which increased his success.

After many weeks Wilson was able to control his pee. Controlling the poos took longer, but Amy’s advice to other parents is a strong **“Take the nappy off and don’t give up”**. Eventually this too became regular and his need for laxatives greatly reduced.

During this time Wilson also underwent a major operation to remove spasticity in his legs (selective dorsal rhizotomy). Doctors were concerned that his toileting control would be affected but the GottaGo was brought to hospital and his first words after the operation were **“I need a wee!”**.

From Amy’s perspective she is **“So glad they stuck with it... It’s that extra step of independence he needs...It would be good if parents were encouraged to try, or at least be aware of the potential to toilet train”**.