BIOFEEDBACK FOR FECAL INCONTINENCE

Hypothesis / aims of study: Anal incontinence is a complex condition related to poor quality of life. Successful Biofeedback therapy in the treatment of anal incontinence require a group of therapeutic procedures including the appropriate use of different electronic instruments to give adequate feedback to the patients as well as adequate control of bowel function. The aim of our study was to demonstrate improvement of quality of life in a selected group of patients treated for a period of 5-10 consecutive weeks.

Study design, materials and methods
385 incontinent patients were evaluated by the Cleveland Clinic incontinence scoring system (CCISS), fecal incontinence quality of life scale (FIQLS), anal manometry and endoanal ultrasound. All patients were offered initial treatment with biofeedback therapy combined with anal electrostimulation and bowel education during 5-10 weeks. CCISS and FIQLS was assessed before and after treatment. Bowel diary was filled by all patients during treatment period. Patients were followed by clinical assessment at 3 months, 6 months and after 1 year. Successful outcome was considered based in the reduction of incontinence episodes and improvement in quality of life as assessed by the questionnaires utilized.

Results
301 patients (226 female) of a mean age of 68 (23-85) years old entered our study. Exclusion criteria was the presence of patulous anus, incontinence related to rectal prolapse, greater sphincter defect. There was a significant improvement in CCSI and FIQLS after 10 weeks in 80% of patients. (p<0.05) Patients treated with greater number of sessions presented better outcomes. (p<0.05) Those with poor clinical outcome had associated factors such as diabetes, IBS, obesity and suspected sphincter atrophy.

Concluding message: Biofeedback therapy is a safe and effective modality for the treatment of anal incontinence. Patient’s perception of improvement can be assessed by validated quality of life questionnaires such as the FIQLS.

Disclosures
Funding: No disclosures Clinical Trial: No Subjects: HUMAN Ethics not Req'd: The therapy was already utilized in the Dept. as part of a treatment protocol. The ethic committee of my Institution was notified and approved the results. Helsinki: Yes Informed Consent: Yes