

TRANS-ANAL IRRIGATION IN FUNCTIONAL BOWEL DISORDERS- A NEW ROLE?

Hypothesis / aims of study

Trans-anal irrigation (TAI) was developed to treat patients with neurogenic bowel dysfunction. It is now being used increasingly in the treatment of functional bowel disorders but published data is scarce. We have been using TAI in our clinic for 9 years. TAI is considered when other less invasive treatment modalities have failed. Our study aims to determine whether TAI improves symptoms in patients presenting with functional bowel disorders with corresponding improvements in quality of life and whether there are differences in the delivery of the TAI between the three functional disorders.

Study design, materials and methods

A cohort of 137 patients with functional bowel symptoms were identified who had commenced TAI and had used it for at least 12 weeks. A postal questionnaire was sent to each patient to determine if they were still using TAI and if so the frequency, water volume and a pre and post symptom score were recorded. Symptoms were measured using the validated Visual Analogue Scale (VAS) scoring system on a scale of 0-10, where 0 represents no symptoms and 10 represents the maximum severity of symptoms.

Results

One hundred and twenty nine patients responded to the questionnaire, 18 male and 111 female (94% response rate).

Ninety two patients were still using irrigation (71%): 37 had symptoms of constipation; 32 had symptoms of obstructed defecation; 23 had faecal incontinence. The median VAS score pre-treatment was 10; the median VAS score post treatment was 5. There is strong evidence that the before and after scores differ for those patients still using irrigation ($p < 0.00005$)

In the group still using TAI, the median number of days per week that TAI was used was 7 and the mean amount of irrigant used was 800 mls.

Thirty seven patients (29%) had discontinued using TAI, reasons for discontinuation were recorded. Nine (2.4%) had stopped due to rectal/anal pain, one (2.7%) had stopped due to rectal bleeding, two (5%) had stopped due to anal leakage after TAI, twelve (32%) had stopped due to TAI not helping their symptoms, two (5%) had stopped due to problems with the balloon and eleven (30%) had stopped but did not give a reason.

Interpretation of results

The results show that TAI is a viable treatment option for patients presenting with a range of functional bowel problems where other less invasive treatments have failed and quality of life is affected. It was acceptable and well tolerated as indicated by frequent and prolonged use in the majority of patients. Efficacy, acceptability and quality of life improvements were demonstrated across the three functional sub groups.

Concluding message

Further research is needed to identify clinical criteria to guide patient selection and predictors of success in patients presenting with functional bowel symptoms.

Disclosures

Funding: none **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** It is a study of an existing treatment **Helsinki not Req'd:** It was not experimental treatment **Informed Consent:** Yes