179

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THERAPEUTIC EFFECT OF ELECTRO-ACUPUNCTURE TREATMENT TO PATIENTS WITH FECAL INCONTINENCE WHO HAVE POOR IMPROVEMENT AFTER 6 MONTHS OF CONVENTIONAL CONSERVATIVE TREATMENT: A PILOT STUDY.

Hypothesis / aims of study

To explore the therapeutic effect of electro-acupuncture (EA) treatment to patients with fecal incontinence (FI) who have poor improvement after 6 months of conventional conservative treatment.

Study design, materials and methods

Inclusion criteria

Subject persists FI after 6 months of conventional conservative treatment

Exclusion criteria

- Subject is having treatment/ completed treatment within 6 months
- Subject tried electrical stimulation/ percutaneous tibial nerve stimulation for FI
- Subject has pacemaker/ metal implant
- Subject is pregnant/ plans to become pregnant.

Methods

EA was delivered by acupuncture accredited physiotherapist once per week for 12 weeks. In each session, 1.5 cun needle was inserted to SP 6 with soreness sensation and electro-pad was placed on sole of the same side of lower limb. Square-shaped waveform with 20Hz and 200s pulse width produced by ITO ES-160 electro-acupuncture machine was applied for 30 minutes.



Outcome measures

FI frequency per week, Wexner Score, validated Chinese Version of Fecal Incontinence Quality of Life Scale (FIQL), Numeric Global Rate of Change Score (NGRCS), pelvic floor muscle power, anal resting pressure and anal contracting pressure were collected before and after the course of EA treatment.

Results

6 patients (5 females and 1 male, mean age was 56.8 years old and FI duration was 2.5 years) were assessed. The mean numeric global rate of change score (NGRCS) was 6. After being analysed by paired sample t test, there were significant improvement from 20.2 to 0.3 times per week (p<0.05) and from 13 to 8.7 (p<0.05) for FI frequency and Wexner Score respectively. There were no significant change in the results of the Chinese Version of Fecal Incontinence Quality of Life Scale (FIQL) (p>0.05), pelvic floor muscle power (p>0.05), anal resting pressure (p>0.05) and anal contracting pressure (p>0.05).

Interpretation of results

The results indicated the EA treatment had a positive effect for patients with FI who resist to conventional conservation treatment in FI frequency and the subjective perception of severity of symptoms. However, the quality of life, pelvic floor muscle power, anal muscle functions in resting and contracting among subjects had not much difference before and after the EA treatment.

Concluding message

EA treatment showed an encouraging result to treat patients who resist to the conventional conservation FI treatments, it may be an alternative modality in the management of FI. In the long run, more subjects should be recruited for further investigation to prove effectiveness and the effect duration of EA treatment for patients with FI.

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Disclosures

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