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WHAT IMPACT DOES A COMPREHENSIVE SERVICE FOR CHILDREN WITH CHRONIC CONSTIPATION AND FAECAL INCONTINENCE HAVE ON LENGTH OF STAY AND HOSPITAL ADMISSION?

Hypothesis / aims of study

Chronic constipation (CC) with or without faecal incontinence (FI) affects 5-30% of children in the United Kingdom (1) and remains a difficult and costly condition to treat. Patients with the most severe symptoms require admission for disimpaction or manual evacuation. STAR is a comprehensive service with minimum criteria of 7 specialists: play-specialist, clinical psychologist, paediatric physiologist, clinical nurse specialists, paediatric gastroenterologist, paediatric surgeon and paediatric radiologist. The group has a weekly multidisciplinary team (MDT) meeting which combined with the Children's Anorectal Physiology Service (CAPS) forms the STAR service of children with CC/FI. The aim of this pilot study is to assess the impact of STAR on length of stay (LOS) and number of admission (NA) for children with CC/FI.

Study design, materials and methods

Data including LOS and number of patients admitted with CC/FI was obtained from our centre's our coding department, from April 2015 to December 2016 (1 year and 9 months). CAPS was introduced in September 2016 (3 months). STAR provides: 1. bowel; 2. psychosocial and 3. physiological assessment for each patient. STAR aims to improve understanding and inform patient management, improving bowel and psychosocial function.

Results

Before STAR LOS: median 37 days (range 11-83) and admissions: median 17 (range 6-14 per month). Since STAR, median LOS 12 days (range 8-48) and admissions: median 6 (range 3-12 per month. There was no significance relationship between before and after introduction of STAR, however, there was a reduction in LOS. Potentially saving 336 bed days per annum. Interpretation of results: Results can be interpreted in Figure 1 below:

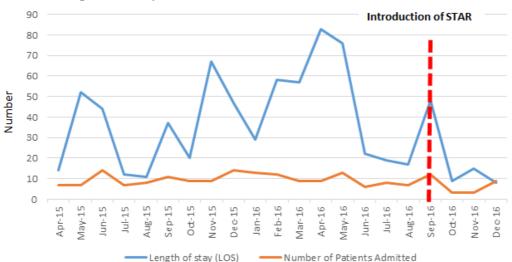


Figure 1: The Impact of CAPS on LOS and Admissions

Concluding message

Preliminary results demonstrate that a comprehensive service for children with CC/FI (STAR service) may decrease the number of hospital admissions and LOS. It is anticipated that the service will improve efficiency and be cost effective.

1. Nice Guidelines (2010)

Disclosures

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