Hypothesis / aims of study
Rectal sensation is a routine physiological investigation in adults with defaecatory disorders. We aim to describe rectal hypersensitivity (RH+) in children with chronic constipation (CC) and faecal incontinence (FI).

Study design, materials and methods
Children’s Anorectal Physiology Service (CAPS) received 70 referrals (September 2016 to present) with CC and FI, who have failed conservative treatments (>2 years). All had awake high resolution anorectal manometry (AHRAM), bowel assessments (St Mark’s Incontinence Score [SMIC], Cleveland Constipation Score [CCS]), transit marker studies and psychosocial assessments. Management was discussed in our weekly specialised MDT.

Results
53 had AHRAM: 44 awake and 9 under anaesthesia. RH+ was demonstrated in 18% (8/44) (Figure 1): 75% female; median age 10 (range 4-14). SMIC abnormal in 88% (7/8) and CCS 100% (8/8). All patients had faecal urgency and urge FI. Patients scored the severity of their symptoms: median score 9 (10 severe; range 7-10). 38% (3/8) were at risk of psychological distress. 25% (2/8) had abnormal transit marker study. Based on MDT discussion, management included psychological support (n = 2), transanal irrigation (n = 2), medicine modification (n = 3), intersphincteric botox (n = 1) and modifying toileting regime (n = 4).

Interpretation of results: Refer to Figure below for interpretation of results

Concluding message
Rectal sensation is easily measured in children. This novel physiological parameter has refined our management of children with CC and FI.

Disclosures
Funding: Health Foundation, Inspiring for Improvement funded the set up of the service Clinical Trial: No Subjects: HUMAN Ethics not Req’d: Patients were seen as part of routine care Helsinki: Yes Informed Consent: Yes