

## FAECAL INCONTINENCE SYMPTOM SEVERITY SCORES FLUCTUATE OVER TIME WITHOUT TREATMENT

### Hypothesis / aims of study

Symptom specific scoring systems are used to evaluate patients with functional bowel disorders. They are also often used to establish effectiveness of novel treatments. Different scoring systems have been developed aiming to quantify either the severity of faecal incontinence (FI) or its impact on quality of life. The Vaizey score is a validated score of FI and was found to be more sensitive and reproducible when compared with other scores. The impact of FI on quality of life can be assessed by means of the Manchester Health questionnaire (MHQ), a validated, symptom-specific quality of life questionnaire.

Patients report that their symptoms vary from week to week. This study therefore aims to determine whether symptom scores also vary over time and by how much.

### Study design, materials and methods

Patients referred to our tertiary referral unit for assessment and treatment of their FI were approached by post each month between the date of referral and outpatient assessment, and asked to complete the Vaizey and MHQ. Stamped, addressed envelopes were included.

### Results

Fourteen patients completed the questionnaires between two and four times before being seen in the outpatient department. Seven completed them three times and one completed it four times. The initial Vaizey, scored out of a maximum of 24, was a median of 14, range 3 to 19. Over subsequent months the Vaizey varied over a range of 10 below the initial score to 7 above. Only one patient always returned the same Vaizey, completing the score three times. Another four patients returned the same Vaizey for two consecutive months, but the score varied on other occasions. The initial MHQ, scored out of a maximum of 900, was a median of 443.33, range 57.5 to 854.17. Over subsequent months, the MHQ varied over a range of 183.33 below the initial score to 141.66 above the initial score. No-one returned the same MHQ from one month to the next.

There was a significant correlation between the Vaizey and MHQ (Spearman correlation,  $p < 0.01$ ). However, there was no significant correlation between the change in Vaizey score from one month to the next and the change in MHQ from one month to the next. The Vaizey worsened from one month to the next on 10 occasions, remained unchanged in 5 and improved in 7. Where the differences in score from one month to the next were all added together, a positive result was obtained. The MHQ worsened from one month to the next on 12 occasions and improved in 8. The sum of all the differences in score from one month to the next was also positive when the MHQ was analysed.

### Interpretation of results

Scoring systems for symptom severity and quality of life for FI vary from one month to the next without treatment. The overall trend of the measured scores was to rise from one month to the next. Patient reporting of symptoms becomes more stable the more times a patient completes the questionnaires. This study does not answer whether symptoms vary from one month to the next, or if merely patients' reporting of symptoms varies.

### Concluding message

The Vaizey and MHQ vary considerably over time in untreated patients. There is an overall upward trend in these scores with time. However, the reporting of symptoms becomes more stable with time. Therefore, changes in symptom severity scores as a result of a novel treatment, quoting single scores before and after treatment, need to be interpreted with caution.

<b><i>Specify source of funding or grant</i></b>	<b>Post as research registrar funded by University Hospital of South Manchester</b>
<b><i>Is this a clinical trial?</i></b>	<b>No</b>
<b><i>What were the subjects in the study?</i></b>	<b>HUMAN</b>
<b><i>Was this study approved by an ethics committee?</i></b>	<b>No</b>
<b><i>This study did not require ethics committee approval because</i></b>	<b>The study purely involved the completion of questionnaires used in our standard clinical practice, did not interfere with their standard care, nor did it involve participants in extra expense.</b>
<b><i>Was the Declaration of Helsinki followed?</i></b>	<b>Yes</b>
<b><i>Was informed consent obtained from the patients?</i></b>	<b>No</b>