

Physicians offer new procedure to manage fecal incontinence, an underreported and debilitating condition

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Fecal incontinence, or the inability to control the bowels, is a highly underreported and stigmatized condition, according to colorectal surgeons at Loyola University Health System (LUHS).

"This is a debilitating condition, which drastically affects a person's quality of life," said Dana Hayden, MD, MPH, colorectal surgeon, LUHS. "People with fecal incontinence avoid leaving the house to prevent an embarrassing accident from happening in public."

Fecal incontinence is more common in older adults, and although it affects women more commonly, men can also suffer from this disorder. This condition can be caused by a variety of factors, including damage to the pelvic nerves or muscles from trauma such as childbirth, and anal or rectal surgery; diseases like diabetes; or complications from radiation. The National Institutes of Health (NIH) estimates that more than 18 million Americans have fecal incontinence, yet Loyola doctors believe it is much higher.

"Fecal incontinence isn't something that people talk about, yet we know from our practice that it is extremely common," said Dr. Hayden, who also is an assistant professor in the Division of Colorectal Surgery at Loyola University Chicago Stritch School of Medicine. "The good news is there are options to manage this condition."



Loyola now offers a new procedure for patients with fecal incontinence called sacral nerve stimulation. The U.S. <u>Food and Drug Administration</u> recently approved this minimally <u>invasive therapy</u> for the treatment of chronic fecal incontinence in patients who have failed or are not candidates for more conservative treatments. This procedure also has been used for years at Loyola in patients with urinary urge incontinence.

The technology uses an implantable apparatus, consisting of a thin wire and a neurostimulator, or pacemakerlike device, to stimulate the nerves that control bowel function. This technology uses an external neurostimulator during a trial assessment period. If the device is effective, physicians implant a device that can be used indefinitely. This procedure is done in an outpatient setting under mild sedation. Patients return home the same day with minimal discomfort.

"Studies have shown that sacral nerve stimulation reduces incontinent episodes and increases quality of life in a majority of patients with chronic <u>fecal incontinence</u>," Dr. Hayden said. "These are dramatic, long-term results for patients who are dealing with chronic bowel control issues."

Provided by Loyola University Health System

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