

Medical Matters



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Q: *I have heard that there is new stimulator device used to treat fecal incontinence. How do I know if it would work for me?*

There are many causes of fecal incontinence (loss of bowel control) and treatments vary. Women are affected more often than men, but both sexes can have symptoms requiring treatment. A trial of adding fiber to your diet (to bulk the stool) and suppositories (to aid evacuation) are used for mild incontinence. Kegel exercises and physical therapy are non-invasive ways to strengthen the pelvic floor muscles. Patients with loose bowel movements and Irritable Bowel Syndrome (IBS) benefit from medical treatment to control those symptoms. Keeping a diary may identify patterns/frequency of accidents.

If nerve damage is suspected, testing of the function of the anal sphincter is often necessary. Surgery to reconstruct the anal sphincter can be performed if a large defect is found. The results after surgery are variable and function can deteriorate over time.

Newer, less invasive procedures have been developed to treat incontinence. The Sacral Nerve Stimulator (SNS) received FDA approval for the treatment of fecal incontinence several years ago.

Originally used for urinary incontinence, studies have shown that SNS also improves bowel control.

The SNS is an implantable device that has shown to be as effective as sphincter reconstruction and is done in an outpatient setting. Prior to surgery, the patient is asked to keep a two week diary recording their bowel accidents. During the outpatient procedure, a thin stimulator wire is surgically placed into the lower spinal cord and the temporary battery is connected. Another two week diary is kept, and if the number of accidents decreases by over 50%, the permanent battery is placed.

The permanent battery looks similar to a pacemaker battery and is barely noticed by patients. Improvements in bowel control can be immediate and long lasting. Adjustments can be made by a device controlled by the patient.

Discuss your symptoms with your physician. If your fecal incontinence persists after medical management, you may benefit from surgical treatment.