WORKSHOP A4 — FAECAL INCONTINENCE

Chair: Christine Norton, Michael Probst

INTRODUCTION AND EPIDEMIOLOGY

Michael Probst

No abstract available

THE WAY TO DIAGNOSIS IN FAECAL INCONTINENCE

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The etiology of fecal incontinence is often multifactorial. To diagnose fecal incontinence a complete clinical history is necessary. Patients need to be properly assessed, including proctologic examination, rectosigmoidoscopy, anorectal manometry (pressure, compliance, sensory threshold, etc.), transanal ultrasonography, and defecography (conventional or dynamic MRI-technique).

Up to now electrophysiological examinations have only been used to a limited degree to complete these diagnostics in fecal incontinence. This is partially due to the inadequate co-operation between neurology and proctology. On the other side, although an increasing number of neurophysiological facilities is becoming available, it is by far not sufficient to meet the demand. For the future, neurologists will need to show more interest and more willingness to perform such examinations.

In patients with incontinence, routine diagnostics should consist of medical history, digital examinations, together with electroneurography of the pudendal nerve (PNTML), and electromyography of the external anal sphincter (EMG is the most important tool). Through these examinations and the other electrophysiological tests, it is possible to distinguish between muscular and neurogenic, and also between central and peripheral lesions. Furthermore, they allow differentiation between acute and chronic changes, and an estimation of the prognosis.

The diagnostic program is additionally supplemented by motor and sensory evoked potentials, and measurements of vegetative nerve paths. Further development of available testing procedures may improve existing methodological shortcomings.

Optimum utilization of the methods is only possible with interdisciplinary co-operation.

CONSERVATIVE TREATMENT

Christine Norton

No abstract available

THERAPEUTIC OPTIONS

Franz Raulf

No abstract available

SACRAL NERVE STIMULATION IN PATIENTS WITH FAECAL INCONTINENCE

Birgit Bittorf, Klaus-Ernst Matzel

No abstract available