

Transanal irrigation bowel routine for people with Cauda Equina Syndrome

Ethans, K; Smith, K; Khandelwal, A; Nankar, M; Shea, J. & Casey, A. (2022) 'Transanal irrigation bowel routine for people with Cauda Equina Syndrome' The Journal of Spinal Cord Medicine

Abstract

Objective: Neurologic bowel incontinence and dysfunction are common with Cauda Equina Syndrome (CES). The study objective was to evaluate the efficacy of Peristeen Anal Irrigation System (PAIS)TM in people with CES.

Design: Clinical Trial.

Setting: Spinal Cord Rehabilitation outpatient clinic at the Health Sciences Centre in Winnipeg.

Methods: Twelve participants with a mean age of 46.2 years (range 34–72 years, 4 females) with CES used PAISTM bowel routine for 10 weeks.

Outcome Measures: Change in Neurogenic Bowel Dysfunction Score (NBD) over 10 weeks relative to baseline.

Secondary outcomes: Change in St. Mark's Fecal Incontinence score (SMFI), Cleveland Clinic Constipation score (CCC), and modified Rectal Surgeons Fecal Incontinence Quality of Life Score (QOL) at week 1, 2, 4, 6, 8 and 10 compared to baseline, and self-rating of bowel function at baseline and 10 weeks. Additionally, colonic transit times were assessed using the radioactive markers (Sitzmarks) method.

Results: Ten participants completed the study. Post-intervention primary outcome NBD score improved ($p < 0.01$). Secondary outcomes also improved significantly, including SMFI ($p < 0.01$), CCC ($p < 0.01$), QOL ($p < 0.01$), self-rating of bowel function ($p < 0.01$), and transit time improved by 22% ($p < 0.05$).

Conclusion: Overall, a significant improvement was observed with the PAISTM for both primary, as well as secondary outcome measures, without any significant adverse effects. As this non-pharmaceutical method of bowel management is effective and has the potential to improve symptoms of bowel dysfunction in people with CES, it should be considered for those in which traditional methods of managing neurogenic bowel fail.

Areas for reflection

- Cauda equina syndrome can be a poorly understood condition due to its rarity. How can you ensure people get appropriate bowel care following cauda equina syndrome?
- Do you have a pathway in place that allows appropriate patients to access trans anal irrigation when clinical appropriate?

You can access a webinar on cauda equina syndrome on demand by clicking [here](#).

