Fecal Incontinence

Fecal or bowel incontinence occurs when you are not able to control your bowel movements.

- This can lead to stool leakage either occasional, while passing gas or a complete loss of bowel control.
- There are multiple reasons for this. Some of the more common causes include diarrhea, constipation and muscle or nerve damage which can be related to aging or giving birth.
- Other reasons can be from history of surgery or radiation to the anal/rectal area, rectal prolapse or rectocele, dementia and physical disability.

Diagnostic Tests:
- Digital rectal exam, Anoscopy/Proctoscopy/Colonoscopy
- Anophysiology Studies: anal manometry, balloon expulsion test, pudendal nerve test.
- Endorectal Ultrasound to assess sphincter defect.
- Contrast enema: X-ray
- MRI: Dynamic pelvic MRI
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Non-surgical treatments:
- Dietary changes/tracking: Keep a diary of what you eat for a week to see if there is any connection between certain foods and incontinence (see attached food diary). Foods that can cause diarrhea/gas and worsen fecal incontinence include:
  - Spicy foods, fatty and greasy foods
  - Cured and smoked meats
  - Carbonated beverages
  - Dairy products
  - Caffeine-containing beverages
  - Alcohol
  - Sugar-free gum and diet sodas
- Fiber supplements: Can help or make symptoms worse. Worthwhile to check out individually. Can help to bind some water when there is diarrhea. Too much fiber may increase the stool volume unfavorably.
- Medication: Anti-diarrheal medication (Lomotil, Imodium, Robinul), bulk agents (fiber supplements such as CitruCEL, Metamucil and others), bile acid binders (Questran). Avoid laxatives.
- Skin Care: Wash with warm water, do not clean too aggressively, avoid soap that can dry and irritate skin, allow area to air-dry, apply moisture barrier creams (Calmsenseptine, Desitin, Zinc Oxide), wear loose cotton underwear.
- Pelvic floor physical therapy and biofeedback training (done by a pelvic floor physical therapist), bowel training program (morning enemas or scheduled rectal wash out), Kegel exercises.

Surgery:
- Sphincteroplasty, sphincter replacement, colostomy, SNS (Sacral Nerve Stimulator implant), SECCA procedure, injection of bulking agent (Solesta), rectal prolapse repair.