



FECAL INCONTINENCE

Fecal incontinence is the inability to control your bowels. You may have stool leakage or you may not be able to hold your bowels until you can reach a toilet. Close to seven million Americans suffer from fecal incontinence, affecting people of all ages, more commonly women. This is not a normal part of aging, and many people feel ashamed and embarrassed.

Fecal incontinence can have several causes including anal sphincter muscle damage, damage of the nerves to the anus or rectum, stool consistency (diarrhea), decreased rectal storage capacity, or pelvic floor dysfunction. The anal sphincter muscles normally are strong enough to keep stool inside the rectum, but damage from childbirth, surgery, or trauma can cause the muscles to weaken. Often, people are not aware of the need to use the bathroom until the stool has already leaked out; this can be caused by decreased nerve sensation or diminished rectal storage capacity. There are many disease states that can cause this, including diabetes, multiple sclerosis, stroke, or pelvic radiation. The consistency of your stool is also an important factor, since it is more difficult to control gas than it is liquids or solids.

Diagnosis of fecal incontinence involves a history and physical examination by your doctor. At that time, you may need further testing which will be scheduled for you. Testing may include anal ultrasound (to look at the shape of the anal sphincters), anal manometry (to determine the tightness of the sphincters and the ability of the sphincters to sense and create pressure), and pudendal nerve motor latency testing (to test for nerve damage).

Treatment of fecal incontinence depends on the cause and severity of the symptoms. Typically it will include dietary changes, bowel training, and may include surgery. Dietary changes involve adding foods that will bulk up the stool to decrease its water content to make it easier to control. Soluble fiber is often helpful to slow the emptying of the bowels. Avoiding caffeine is also helpful since caffeine relaxes the anal sphincter muscles. Keeping a food diary of what you eat and when you have an incontinence episode may help identify “trigger” foods that cause accidents. Developing a regular pattern of bowel movements such as going to the toilet 30 to 45 minutes after every meal can also be helpful in avoiding incontinence. Surgery may be an option for people whose fecal incontinence is caused by sphincter damage.

Test results will be reviewed with you during an office appointment scheduled one week after the tests are completed. This is done to review your ultrasound images and test results with you, explaining the findings and discussing your treatment options in person.

Please fill out the fecal incontinence questionnaire and bring the form with you to your first office appointment or scheduled test.

FECAL INCONTINENCE QUESTIONNAIRE

Please circle the frequency of symptoms you have below					
Type of Incontinence	Never	Rarely (less than one time per month)	Sometimes (less than once a week but more than once a month)	Usually (less than once a day but more than once a week)	Always (more than once a day)
Solid stools	0	1	2	3	4
Liquid stools	0	1	2	3	4
Gas (flatus)	0	1	2	3	4
Do you wear a pad?	0	1	2	3	4
Does this alter your lifestyle?	0	1	2	3	4



FECAL INCONTINENCE QUESTIONNAIRE (continued)

1. In general, would you say your health is (circle one):
 - a. Excellent
 - b. Very good
 - c. Good
 - d. Fair
 - e. Poor

2. For each of the items, please indicate how much of the time the issue is a concern for you due to the accidental bowel leakage. [If it is a concern for you for reasons other than accidental bowel leakage, then check the box under N/A (not applicable)]

Due to accidental bowel leakage	Most of the time	Some of the time	A little of the time	None of the time	Not applicable
I am afraid to go out.	1	2	3	4	N/A
I avoid visiting friends.	1	2	3	4	N/A
I avoid staying overnight away from home.	1	2	3	4	N/A
It is difficult for me to get out & do things like go to a movie or to church.	1	2	3	4	N/A
I cut down on how much I eat before I go out.	1	2	3	4	N/A
Whenever I am away from home, I try to stay near a restroom as much as possible.	1	2	3	4	N/A
It is important to plan my schedule (daily activities) around my bowel pattern.	1	2	3	4	N/A
I avoid traveling.	1	2	3	4	N/A
I worry about being able to get to the toilet in time.	1	2	3	4	N/A
I feel I have no control over my bowels.	1	2	3	4	N/A
I can't hold my bowel movement long enough to get to the bathroom.	1	2	3	4	N/A
I leak stool without even knowing it.	1	2	3	4	N/A
I try to prevent bowel accidents by staying very near a bathroom.	1	2	3	4	N/A



3. Due to accidental bowel leakage, indicate the extent to which you AGREE or DISAGREE with each of the following items. [IF it is a concern for you for reasons other than accidental bowel leakage, then circle the box under N/A (not applicable)].

Due to accidental bowel leakage	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	Not applicable
I feel ashamed.	1	2	3	4	N/A
I cannot do many of the things I want to do.	1	2	3	4	N/A
I worry about bowel accidents.	1	2	3	4	N/A
I feel depressed.	1	2	3	4	N/A
I worry about others smelling stool on me.	1	2	3	4	N/A
I feel like I am not a healthy person.	1	2	3	4	N/A
I enjoy life less.	1	2	3	4	N/A
I have sex less often than I would like to.	1	2	3	4	N/A
I feel different from other people.	1	2	3	4	N/A
The possibility of bowel accidents is always on my mind.	1	2	3	4	N/A
I am afraid to have sex.	1	2	3	4	N/A
I avoid traveling by plane or train.	1	2	3	4	N/A
I avoid going out to eat.	1	2	3	4	N/A
Whenever I go someplace new, I specifically locate where the bathrooms are.	1	2	3	4	N/A

4. During the past month, have you felt sad, discouraged, hopeless, or had so many problems that you wondered if anything was worthwhile?
- Extremely so – to the point that I have just about given up
 - Very much so
 - Quite a bit
 - Some – enough to bother me
 - A little bit
 - Not at all

Please plan to review your studies with us by making an office appointment scheduled for a few days after all of your studies have been completed. At that time, your options will be discussed with you and you will have an opportunity to ask questions regarding your results. We appreciate your time!