



# Medical Treatment and Management of Incontinence

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International Foundation for Gastrointestinal Disorders ([www.iffgd.org](http://www.iffgd.org))

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Many otherwise healthy people suffer from incontinence or loss of bowel control. Fecal incontinence (also called bowel incontinence) strikes people of all ages. It involves the accidental loss of solid or liquid stool.

If you experience incontinence here are some things you need to know:

- You are not alone – incontinence is common in men and women of all ages
- You do not have to just “live with it”
- Some illnesses that cause incontinence can be treated
- Incontinence does not have to be a part of aging
- There are things you and your doctor can do to help improve continence
- You should tell your doctor

Incontinence is a long-term disorder that can limit your activities. Treatment for incontinence should begin with reviewing how you manage and what effect incontinence has on your daily life. Attention then can turn toward ways to minimize or contain incontinence.

Management and treatment may include a combination of the following:

- Lifestyle changes – being prepared
- Dietary changes
- Medication
- Bowel management/retraining program
- Biofeedback therapy (neuromuscular reeducation)
- Skin care
- Other newer procedures or devices

A good management plan for incontinence will minimize episodes and allow you to regain a sense of personal control. Management plans differ among individuals. A plan for you should address your specific symptoms. It may include a number of approaches.

## **Lifestyle changes – being prepared**

Managing incontinence often means being prepared. Knowing what to do when it does happen can help prevent fear from consuming your life. For example, it helps to always have cleanup supplies and extra clothes on hand. Protective undergarments may be a good idea. Locate the restrooms in public places and make sure that you can get to them easily. Be prepared to change plans at the last minute.

## **Dietary changes**

Diarrhea and constipation contribute to incontinence for many people. In some cases, food choices can be modified to improve bowel function and continence. For example, it may help to reduce or avoid things in your diet that stimulate the gut. These may provoke diarrhea. Examples include meals that are too large or high in fat, fried foods, coffee, caffeine, alcohol, and some fruit juices. Other foods may slow the bowel. Examples include bananas, rice, pasta, and yogurt.

## **Medication**

Medicines can help improve diarrhea or constipation. They can help make your bowel patterns more predictable. Examples include antidiarrheal medications, fiber supplements, stool softeners, and laxatives.

## **Bowel management/retraining program**

Bowel management or retraining involves learning to develop a more predictable schedule for moving your bowels. This may include dietary changes or the use of medicines as well as establishing regular times for moving your bowel. It also involves having toilet facilities available and being able to respond when feeling the need to have a bowel movement.

## **Biofeedback therapy**

Biofeedback therapy for incontinence involves re-educating muscles and nerves. Using special sensors, a trained therapist can help you change bodily functions

you are usually not aware of. In this way abnormal responses can be changed to more normal and effective patterns. It is essential to work with a therapist knowledgeable in disorders related to the pelvic floor and rectum. The goal of biofeedback therapy is to:

- Improve ability to detect contents in the rectum
- Improve ability to contract pelvic floor muscles in response to sensation

### **Skin care**

Protection of the skin around the anus is important. Residue or moisture remaining on the skin leads to irritation. It can cause itching, pain, and small amounts of bleeding. After cleansing gently, the skin should be dried well. If itching or irritation persists, talk to your doctor about ways to protect or soothe the area.

### **Newer treatment options**

Other treatments continue to be developed to improve continence. These range from nerve stimulation in the lower pelvic area, to implants, and injection of bulking materials. Two newer treatment options are:

- InterStim Therapy is an implantable system designed to improve bowel control. It uses mild electrical stimulation of the sacral nerves to influence the behavior of the pelvic floor muscles and bowel. In the U.S. it was approved in 2011 by the FDA for the treatment of chronic bowel incontinence in patients who have failed or are not candidates for more conservative treatments.
- Solesta is a sterile gel that is injected into a part of the anal canal to improve bowel control in patients for whom conservative therapies have failed. Solesta has been available in Europe since 2006 and was approved in 2011 by the FDA in the U.S.

## **Summary**

Current management and treatment options for incontinence may improve your quality of life. They can mean the difference between social isolation and a productive life. However, these measures do not guarantee a return to complete continence. There is a great need for research aimed at finding better treatments to improve lives of affected individuals.

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