

EFFICACY AND TOLERANCE OF RECTAL IRRIGATION IN CHILDREN WITH IDIOPATHIC FUNCTIONAL CONSTIPATION

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Aim: Rectal irrigation is a well established method of achieving managed continence in children with spina bifida and congenital colorectal anomalies. Introduction of this technique in children with functional constipation has been limited due to concerns regarding perceived unacceptability in patients, many of whom have behavioural issues. This audit aimed to assess efficacy and tolerability of rectal irrigation in children with idiopathic constipation and soiling.

Methods: Cases were identified by our specialist nursing team from their prospectively recorded rectal irrigation database. Data were collected including age at treatment introduction, change in soiling symptoms and rectal awareness, and long term tolerance of treatment. Only patients with > 3 months follow-up data were included.

Main results: Of 133 children receiving rectal irrigation, 38 had functional constipation; 35 had follow up of >3 months. All commenced in the last 5 years. Median age at commencing irrigation was 13y 6 months (range 4y - 16y 6 months). Median duration of follow-up was 18 months (range 3-72 months). Our specialist nursing team achieved initial tolerance in 34/35 patient (97%), and 31 (89%) continued to tolerate rectal irrigation. 2 patients requested conversion to an ACE, and 1 patient was managed with a stoma. For those continuing with treatment where soiling was a daily issue, 24/28 (86%) reported significant improvements. 10 patients have reported improved rectal awareness but only 2 patients are completely independent of irrigation to date.

Conclusion: Rectal irrigation is effective and well tolerated in children with idiopathic functional constipation, although we have yet to show recovery to the point of independence. We feel that our high rates of tolerance are due to specialist nursing team involvement, including play specialists. In future we plan to use symptom severity questionnaires in our clinics to objectively quantify pre and post treatment bowel function.