

spina bifida

Passport to success

Key facts about managing bowel incontinence

This section covers bowel continence management, including constipation and other bowel problems.

You have probably discovered that achieving bowel continence has been one of your most difficult challenges.

The goal of effective bowel management is a routine that enables you to:

- avoid bowel accidents
- maintain stool consistency, and avoid constipation and diarrhoea
- achieve social continence at work and at play.

What is the cause of bowel incontinence?

As with the neurogenic bladder, bowel incontinence is caused by spina bifida related nerve damage. The nerves between the spinal cord and the bowel system have been damaged.

What are the main things that require management?

The nerve damage has caused the following:

- reduced sensation to know that your bowel is full and needs emptying, leading to bowel accidents
- reduced sensation to know when an accident has occurred
- weaker anal muscles making it more difficult for the anus to hold stools in
- bowel functioning which makes you much more prone to constipation, and if this occurs for a long time, the lower bowel becomes very stretched and even less sensitive.

The above problems will range from mild to severe in people with spina bifida. Your particular symptoms hopefully will be very mild.

What are the keys to effective bowel management?

The introduction of clean intermittent catheterisation (CIC) has made it so much easier to manage bladder incontinence in a way that supported an independent lifestyle. Nothing similar has been found for the bowel.

There is no bowel management technique which stands out like CIC does for the bladder.

How to manage bowel incontinence

The keys to effective bowel continence management are:

- understanding exactly how your bowel works and how it reacts to different food types
- how mobile you are – walker or in a wheelchair – makes a big difference. The more you exercise, the better your bowels will

function. Maintaining your mobility will protect you from constipation.

- keeping your stool at the right consistency (ie. too hard = constipation; too soft = diarrhoea) through careful diet and exercise so that your bowel is able to be managed
- effectively ‘training your bowel’ so that it is full at set times, thus making an emptying routine possible
- using the right aid to help empty the bowel — microenemas, large volume washouts, etc.
- great diet and plenty of exercise. These will keep your weight down and prevent obesity.

With a positive attitude, good organisational skills and making sure you regularly get advice from experts, you can effectively manage bowel incontinence.

If your bowel management is not ‘bomb proof’ by early adulthood, get specialist assistance from an expert. It can be difficult to talk about and really confronting, but you simply must.

Why is it so important to avoid becoming constipated?

Constipation can occur very quickly in spina bifida and makes effective continence management impossible.

Constipation increases the risk of urinary tract infections.

Many people with spina bifida have a natural tendency toward having firm stools. This is good, as firmer stools are easier to manage than loose stools. However, constipation where the stool is too hard is not good.

Constipation is often associated with bouts of diarrhoea, which is very confusing. The ‘too hard’ stools block the bowel; very soft and runny stools stuck above the constipation cannot be processed by the bowel properly, and will flow around the hard material causing a bout of diarrhoea.

Chronic constipation also stretches the bowel and leads to weakened sensation. This stretching can take years to get back to normal.

What causes constipation and diarrhoea?

The primary causes are:

- poor diet and lack of exercise
- medications, especially some used for bladder incontinence. Antibiotics – often for urinary tract infections – may cause temporary diarrhoea.