

# Oxfordshire Clinical Commissioning Group

# **Thames Valley Priorities Committee Commissioning Policy Statement**

Policy No.248b (TVPC 3a) Anal Irrigation Systems for the Management of Faecal

**Incontinence/Constipation** 

Recommendation by TVPC January 2014/ updated July 2018<sup>1</sup> and May 2021<sup>2</sup>

Date of issue: September 2021

Anal irrigation, also known as transanal irrigation or rectal irrigation is a method of emptying the lower bowel using warm tap water<sup>3</sup>. Anal irrigation may be used in a number of clinical scenarios to facilitate bowel management and thus improve the quality of life of people with chronic faecal incontinence and/or constipation.

The Thames Valley Priorities Committee has considered the evidence for the use of anal irrigation systems and **recommends** their use only:

- for patients who have exhausted all other conservative treatment options, appropriate to their needs; (see Appendix 1)
- following a referral to a specialist continence nurse or therapist-led specialised bowel management service OR to a secondary care specialist in bowel management

Commissioners of NHS services may wish to refer to the Royal College of Surgeons *High Value Care Pathway for faecal incontinence* (2017)<sup>4</sup> that provides a comprehensive patient care pathway to guide service provision. NB Providers of NHS services should note that this is a national pathway and not all interventions included may be commissioned locally.

#### NOTES:

• Potentially exceptional circumstances may be considered by a patient's CCG where there is evidence of significant health status impairment (e.g. inability to perform activities of daily living) and there is evidence that the intervention sought would improve the individual's health status.

- This policy will be reviewed in the light of new evidence or new national guidance, eg, from NICE.
- Oxfordshire CCG clinical polices can be viewed at <a href="http://www.oxfordshireccg.nhs.uk/professional-resources/policies">http://www.oxfordshireccg.nhs.uk/professional-resources/policies</a>

#### **OPCS Procedure Codes**

<sup>1</sup> This policy has been updated with new links to recent guidance; no other changes have been made.

<sup>&</sup>lt;sup>2</sup> No changes were made to the policy following review by the TVPC.

<sup>&</sup>lt;sup>3</sup> NICE MTG36 (2018) Peristeen transanal irrigation system for managing bowel dysfunction. https://www.nice.org.uk/guidance/MTG36

<sup>&</sup>lt;sup>4</sup> Royal College of Surgeons (2017) Commissioning Guide - *High Value Care Pathway for faecal incontinence*. <a href="https://www.rcseng.ac.uk/standards-and-research/commissioning/commissioning-guides/topics/">https://www.rcseng.ac.uk/standards-and-research/commissioning/commissioning-guides/topics/</a>

Appendix 1

The Royal College of Surgeons (RCS) provides the following guidance on the care pathway and management strategies/treatments for faecal incontinence:

BOWEL CARE PATHWAY FOR FAECAL INCONTINENCE (Nursing)



#### PATIENT REFERRED FROM GP

Ensure all appropriate investigations for red flag symptoms are completed



### **Assessment**

PR Examination

Ensure all appropriate investigations for red flag symptoms are completed



## Initial bowel management

Dietary modification

Medication (anti-motility, bulking agents)

Advice on continence products

Reassurance and lifestyle advice

Access to help with relevant physical, emotional, psychological and social issues

Advice about relevant support groups



If no improvement, patient should be considered for specialist management



Anorectal physiological testing and endoanal ultrasound to assess sphincter function and anatomy

### Nurse or therapist led management\*:

Pelvic floor muscle training
Bowel retraining
Biofeedback
Trans-anal irrigation
Anal plugs
Skin care Helpline
Counselling/psychological support



Individuals who continue to experience symptoms of faecal incontinence should be asked if they wish to have further treatments and be considered for specialist management/surgical intervention.

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