

# **NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE**

## **Centre for Clinical Practice**

### **Review of Clinical Guideline (CG49) - The management of faecal incontinence in adults**

#### **Background information**

Guideline issue date: 2007

3 year review: 2010

National Collaborating Centre: National Clinical Guidelines Centre (formerly NCC Acute Care)

#### **Final review decision**

- The guideline should not be updated at this time.
- The guideline will be reviewed again in 3 years.

#### **Factors influencing the decision**

##### **Literature search**

1. From initial intelligence gathering and a high-level randomised control trial (RCT) search clinical areas were identified to inform the development of clinical questions for focused searches. Through this stage of the process 49 studies were identified relevant to the guideline scope. The identified studies were related to the following clinical areas within the guideline:
  - Initial management of faecal incontinence (use of absorbent products and plugs and modification of drug administration)

- Specialised management for faecal incontinence (biofeedback and pelvic floor muscle/anal sphincter exercises)
  - Surgical management of faecal incontinence
2. Five clinical questions were developed based on the clinical areas above, qualitative feedback from other NICE departments and the views expressed by the Guideline Development Group, for more focused literature searches. In total, 95 studies were identified through the focused searches but no identified new evidence contradicts current guideline recommendations.
  3. No evidence was identified that was relevant to research recommendations in the original guideline.
  4. Several ongoing clinical trials (publication dates unknown) were identified focusing on surgical procedures and pharmacological treatments for faecal incontinence. The results of these trials have not been published at this time but may contribute towards the evidence base relating to management of faecal incontinence in the next update review.

### **Guideline Development Group and National Collaborating Centre perspective**

5. A questionnaire was distributed to GDG members and the National Collaborating Centre to consult them on the need for an update of the guideline. Five responses were received with respondents highlighting that since publication of the guideline more literature has become available on surgical procedures with emerging data on posterior tibial nerve stimulation as a new intervention. In addition, one GDG member highlighted a planned updated Cochrane systematic review focusing on biofeedback therapy for faecal incontinence which may have an impact on guideline recommendations in the next update review. This feedback contributed towards the development of the clinical questions for the focused searches.

6. There was agreement among respondents that there is insufficient variation in current practice supported by adequate evidence at this time to warrant an update of the current guideline.

### **Implementation and post publication feedback**

7. No new evidence relating to guideline recommendations was identified through post publication feedback. All enquiries were routine and did not reflect a need to update the guideline.
8. An analysis by the NICE implementation team indicated that adherence to NICE guidance for faecal incontinence is variable. In addition, the Royal College of Physicians (2010) National Audit of Continence Care report highlighted that a great majority of continence services are poorly integrated across acute, medical, surgical, primary, care home and community settings resulting in disjointed care for patients and carers.
9. No new evidence was identified through post publication enquiries or implementation feedback that would indicate a need to update the guideline.

### **Relationship to other NICE guidance**

10. NICE guidance related to CG49 can be viewed in [Appendix 1](#).
11. In particular, the scoping process is underway for a new NICE interventional procedure on percutaneous tibial nerve stimulation for faecal incontinence which may be relevant in a future update review.

### **Summary of Stakeholder Feedback**

**Review proposal put to consultees:**

The guideline should not be updated at this time.

The guideline will be reviewed again according to current processes.

12. In total eight stakeholders commented on the review proposal recommendation during the 2 week consultation period.
13. Five out of eight stakeholders agreed and 1 stakeholder disagreed with the review proposal recommendation that this guideline should not be updated at this time.
14. Two studies were submitted through stakeholder consultation relating to a surgical procedure and a faecal incontinence management system. These studies did not provide conclusive new evidence to warrant an update of guideline recommendations at this time.
15. During consultation, several areas to consider in future updates of the guideline were highlighted including management of obstetric sphincter injury, management of incontinence secondary to rectal prolapsed and extension of the scope to cover children and young people.

**Anti-discrimination and equalities considerations**

16. No evidence was identified to indicate that the guideline scope does not comply with anti-discrimination and equalities legislation. The original scope is inclusive of all adults (age 18 and older) presenting with faecal incontinence with the guideline relevant in home, care homes and hospitals.

**Conclusion**

17. Through the process no additional areas were identified which would indicate a significant change in clinical practice. There are no factors described above which would invalidate or change the direction of

current guideline recommendations. The Faecal incontinence guideline should not be updated at this time.

Fergus Macbeth – Centre Director  
Sarah Willett – Associate Director  
Emma McFarlane – Technical Analyst

Centre for Clinical Practice  
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## Appendix 1

The following NICE guidance is related to CG49:

<b>Guidance</b>	<b>Review date</b>
CG32: Nutrition support in adults, 2006	To be reviewed February 2011.
CG40: Urinary incontinence: the management of urinary incontinence in women, 2006	Update currently being undertaken. Publication TBC.
IPG159: Stimulated graciloplasty for faecal incontinence, 2006	No review date specified.
IPG66: Artificial anal sphincter implantation, 2004	Reviewed for update in 2007 but no additional evidence found.
IPG99: Sacral nerve stimulation for faecal incontinence, 2004	No review date specified.
IPG34: Circular stapled haemorrhoidectomy, 2003	No review date specified.
<b>Related NICE guidance not included in CG49</b>	
IPG276: Transabdominal artificial bowel sphincter	No review date specified.

implantation for faecal incontinence, 2008	
IPG210: Injectable bulking agents for faecal incontinence, 2007	No review date specified.
IPG161: Percutaneous endoscopic colostomy, 2006	No review date specified.
<b>Related NICE guidance in progress</b>	
Interventional procedure - Endoscopic radiofrequency therapy of the anal sphincter for faecal incontinence (SECCA)	In progress.  Provisional publication date: Spring 2011.
Interventional procedure – Percutaneous tibial nerve stimulation for faecal incontinence	In progress.  Provisional publication date: TBC.