

Sacral nerve stimulation for faecal incontinence

**Understanding NICE guidance –
information for people considering the
procedure, and for the public**

November 2004



Information from Interventional Procedure Guidance 99

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Copies of this booklet can be ordered from the NHS Response Line; telephone 0870 1555 455 and quote reference number N0747.

A version in Welsh and English is also available, reference number N0748. Mae fersiwn yn Gymraeg ac yn Saesneg ar gael hefyd, rhif cyfeirnod N0748. The NICE interventional procedures guidance on which this information is based is available from the NICE website (www.nice.org.uk). Copies can also be obtained from the NHS Response Line, reference number N0746.

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About this information

This information describes the guidance that the National Institute for Clinical Excellence (NICE) has issued to the NHS on a procedure called sacral nerve stimulation. It is not a complete description of what is involved in the procedure – the patient's healthcare team should describe it in detail.

NICE has looked at sacral nerve stimulation for faecal incontinence before. At that time, guidance was issued, but NICE also asked for a thorough review to be done of all the studies carried out on the procedure. This review has now been completed, and NICE has looked at the results in an update of its guidance. This information describes the updated guidance.

This guidance is part of NICE's work on 'interventional procedures' (see 'Further information' on page 10).

About sacral nerve stimulation

Faecal incontinence is the medical term for what happens when a person passes faeces (stools) without the normal amount of control. It can happen as a result of problems with the anal sphincter, which is the ring of muscle that keeps the opening of the anus closed. Such problems may be due to sphincter damage, spinal injury or a neurological disorder.

Sacral nerve stimulation is a way of using electrical pulses to keep the anal sphincter closed. It is only suitable for people who have a weak but intact sphincter. It involves inserting electrodes under the skin in the lower back and connecting them to a pulse generator. This system produces pulses of electricity that are thought to affect the nerves controlling the lower part of the bowel and the anal sphincter, with the result that a person does not pass faeces until he or she is ready to do so. When a person wants to pass faeces, he or she uses a magnet to interrupt the pulses of electricity.

There are three stages to getting the system inserted and working. In the first stage, a temporary lead is inserted into the lower back and this is connected to a pulse generator outside the body. The doctor and patient can then test how well the system works in the patient's body and the best site for the leads.

The second stage involves testing the electrical 'settings' to find the one that gives the best control. After a time, if the patient and doctor agree that there is a significant improvement in the incontinence, the patient goes on to have the final stage of the procedure. This involves stitching the permanent electrodes into place and inserting the pulse generator under the skin in the abdomen.

How well it works

What the studies said

In one study, 19 out of 46 patients who had the permanent system put in place had no more episodes of incontinence (as a percentage, this was 41% of patients). In another study, this was the case for 12 out of 16 patients (75%). The numbers of people who had half or less than half the number of episodes of incontinence ranged from three out of four people in one study to all 16 people in another study. There were also some signs that people could delay having to open their bowels once they had the permanent system in place. And there was also some evidence that people's quality of life was improved once the sacral nerve stimulation system was in place.

Risks and possible problems

What the studies said

In the studies that NICE found, 10 out of 266 patients had a problem during the test phase when the temporary leads were in place. One hundred and forty-nine patients out of the original 266 people went on to have the permanent system put in place. Nineteen of these patients had problems afterwards:

- three patients developed an infection that meant the system had to be removed
- the leads moved in seven patients – five patients had to have them repositioned in another operation and the remaining two patients had the system removed
- six patients felt pain after the surgery.

Over the past few years, doctors have developed new methods of putting the system in place, with the aim of reducing the number of problems for patients.

What has NICE decided?

NICE has considered the evidence on sacral nerve stimulation. It has recommended that when doctors use it for people with faecal incontinence, they should be sure that:

- the patient understands what is involved and agrees (consents) to the treatment, and
- the results of the procedure are monitored.

NICE has also said that the procedure to put the system in place should only be carried out in specialist units where the doctors have particular knowledge of tests and treatments for faecal incontinence.

What the decision means for you

Your doctor may have offered you sacral nerve stimulation. NICE has considered this procedure because it is relatively new. NICE has decided that the procedure is safe enough and works well enough for use in the NHS. Nonetheless, you should understand the benefits and risks of sacral nerve stimulation before you agree to it. Your doctor should discuss the benefits and risks with you. Some of these may be described above.

Further information

You have the right to be fully informed and to share in decision-making about the treatment you receive. You may want to discuss this guidance with the doctors and nurses looking after you.

You can visit the NICE website (www.nice.org.uk) for further information about the National Institute for Clinical Excellence and the Interventional Procedures Programme. A copy of the full guidance on sacral nerve stimulation for faecal incontinence is on the NICE website (www.nice.org.uk/IPG099guidance), or you can order a copy from the website or by telephoning the NHS Response Line on 0870 1555 455 and quoting reference number N0746. The evidence that NICE considered in developing this guidance is also available from the NICE website.

If you want more information on incontinence, a good starting point is NHS Direct (telephone 0845 46 47), or NHS Direct Online (www.nhsdirect.nhs.uk).

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