

# Guidelines for the use of Trans Anal Irrigation (TAI) as a Treatment for Chronic Constipation or Faecal Incontinence Refractory to Standard Treatments in Adults

## What is Trans Anal Irrigation (TAI)?

TAI is a treatment for constipation or faecal incontinence which allows washout of the lower bowel. Instillation of water produces rectal distension and is thought to stimulate peristalsis. It is self-administered by the patient at home, after adequate training in the use of equipment designed for this purpose. This is minimally invasive, safe and effective for the management of bowel dysfunction which is refractory to standard treatments. The purpose of this document is to provide criteria for the use of TAI.

## Efficacy & Safety

A review by Emmett et al (2015) concluded the success rate of TAI in the management of constipation is around 50%. This can be considered adequate given the chronic, refractory nature of symptoms and the simple, reversible nature of this treatment (Christensen et al, 2010). Etherson et al (2016) found around 60% of patients with chronic constipation refractory to all other non-surgical treatments used TAI for an extended period of time (1-2 years or more) and felt their symptoms were significantly improved.

TAI has been extensively reported as simple to perform and safe (Christensen et al, 2009), with the estimated risk of the most serious complication (TAI induced colonic perforation) being less than 0.0002% per irrigation (Emmanuel et al 2013). A systematic review and meta-analysis by Emmett et al (2015) found that minor side-effects (abdominal cramps, ano-rectal pain, anal canal bleeding, leakage of irrigation fluid and expulsion of rectal catheter) were experienced by some patients.

## Eligibility for use

Chronic constipation (in absence of red flags)	Chronic faecal incontinence: (in absence of red flags)
<p><b>Patient fulfils all of the following:</b></p> <ul style="list-style-type: none"> <li>➤ Diagnosis (following bowel assessment) of constipation which may be idiopathic, IBS-C, opioid induced, neurological or result from obstructive defaecation syndrome</li> <li>➤ Inadequate response to at least 2 types of laxatives used at maximum tolerated dose</li> <li>➤ Inadequate response to biofeedback therapy and /or lifestyle changes</li> <li>➤ Inadequate response to specialist initiated drugs if indicated and available locally e.g. Prucalopride, , Linaclotide, Naloxegol</li> <li>➤ Symptoms present &gt; 6 months</li> </ul>	<p><b>Patient fulfils all of the following:</b></p> <ul style="list-style-type: none"> <li>➤ Diagnosis (following bowel assessment) of faecal incontinence which may be idiopathic, IBS-D, neurological or result from obstructive defaecation syndrome or low anterior resection syndrome (LARS)</li> <li>➤ Inadequate response to biofeedback therapy and /or lifestyle changes</li> <li>➤ Inadequate response to constipating medication</li> <li>➤ Symptoms present &gt;6 months</li> </ul>

**NB Patients with severe (bed-bound) neuro-constipation need not fulfil severity criteria, biofeedback & lifestyle measures. Those at risk of faecal incontinence need not have full trials of laxatives or specialist initiated drugs.**

There are a range of products available which may benefit different clinical presentations. Where patients can manage any product, the most cost effective option should be used. Patients are reviewed and supported by their specialist healthcare professional (HCP) until an effective regime is established. They are then discharged back to the care of their GP.

## How to prescribe

The Specialist HCP will advise the GP, in writing, of what to prescribe (including name and codes) and frequency of ordering. Please note, initial prescriptions may be requested before or after initiation of TAI depending on local arrangements within services. On-going prescriptions are the responsibility of the GP. In the event of any queries, the patients and / or GP should contact the Specialist Service for advice.

## When to stop TAI

For those patients with refractory bowel dysfunction whose symptoms improve with TAI, it should be considered as a long term management solution. The therapeutic effect may reduce over time and treatment should be discontinued if it becomes ineffective following adjustments from the specialist team who will then advise GP when discontinuation is appropriate. If any of the following occur, TAI should be discontinued and the Specialist HCP consulted for further advice: **Pregnancy, colorectal cancer, change in bowel habit until cancer is excluded, during chemotherapy, during episodes of active IBD, anal /colo-rectal stenosis, active diverticulitis, ischaemic colitis, for 3 months post rectal /colo-rectal surgery, for 12 months post radical prostatectomy, for 4 weeks post polypectomy.**

## References:

- Christensen P, Krogh K, Buntzen S, Payandeh F, Laurberg S. (2009) "Long-term outcome and safety of transanal irrigation for constipation and faecal incontinence," Diseases of the Colon and Rectum, vol. 52, no. 2, pp. 286–292
- Christensen P, Krogh K. (2010) Transanal irrigation for disordered defecation: a systematic review. Scandinavian Journal of Gastroenterology. 45(5): pp517–27
- Emmanuel A.V, Krogh K, Bazzocchi G et al. (2013) "Consensus review of best practice of transanal irrigation in adults," Spinal Cord, vol. 51, no. 10, pp. 732–738
- Emmett C.D, Close H.J, Yiannakou Y, Mason J.M (2015): "Trans-anal irrigation therapy to treat adult chronic functional constipation: systematic review and meta-analysis" BMC Gastroenterology 15:139 DOI 10.1186/s12876-015-0354-7
- Etherson K.J, Minty I, Bain I. M, Cundall J, Yiannakou Y (2017) "Transanal Irrigation for Refractory Chronic Idiopathic Constipation: Patients Perceive a Safe and Effective Therapy" Gastroenterology Research and Practice, Volume 2017, Article ID 3826087, 6 pages Hindawi Publishing Corporation <https://doi.org/10.1155/2017/3826087>

## PRODUCT INFORMATION

<b>PRODUCT</b>	<b>PACK CONTENTS</b>	<b>CODE</b>	<b>FREQUENCY</b> (based on 15 irrigations per month)
Aquaflush Compact	1 hand pump, 15 cones	AFCM	1 per month
Qufora Irrisedo MiniGo System	1 hand pump, 30 cones	QMGO	1 per 2 months
Qufora Irrisedo MiniGo Flex	1 hand pump, 30 cones	QMGOFLEX	1 per 2 months
Aquaflush Compact Plus	1 hand pump, 15 cones	AFCPM	1 per month
Aquaflush Lite	1 water bag, pump, tube, 15 cones	AFLM	1 per month
Qufora Irrisedo Cone System	1 water bag with pump, 15 cones,	QTM	1 per month
Qufora Irrisedo Flow	1 water bag with pump, 30 cones,	QFLOWSET	1 per 2 months
Peristeen Plus balloon catheter System	Control unit, water bag, tubing, 2 balloon catheters	29140	1 per 6 months
Peristeen Plus Balloon catheter Accessory Unit	15 catheters, water bag	29142	1 per month
Peristeen Plus Cone catheter System	Control unit, water bag tubing, 2 cones	29160	1 per 6 months
Peristeen Plus Cone catheter Accessory Unit	15 cones, 1 water bag	29162	1 per month
Qufora Klick Catheter Set	Water bag, 15 rectal catheters, tubing	QKCATH	1 per month
Qufora Klick Control Unit	Unit and velcro strap	QKCONTROL	1 per 6 months
Navina Smart System	Smart control unit (touch sensitive), water container, tubes, 2 rectal catheters / cones	69009 (2 catheters) 69019 (2 cones)	400 uses or 2 years 400 uses or 2 years
Navina Classic System	Control unit (hand pump), water container, tubing, 2 catheters /cones	69005 (2 catheters) 69017 (2 cones)	1 per 6 months 1 per 6 months
Navina Consumable Set	Water bag, 15 catheters / cones	69003 (15 catheters) 69016 (15 cones)	1 per month 1 per month
Navina Tubing Set	Tubing	69011	1 per 6 months