

Digestive Diseases

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Aim: Since there are very limited data on patients with spina bi da treated by sacral neuromodulation, we report a case of a 22 year old women with combined fecal (grade III) and urinary over ow incontinence based on a follow-up of 28 months. Urinary over ow incontinence manifested itself in frequent urgency episodes along with the necessity of clean intermittent self catheterization.

Methods: Peripheral nerve evaluation (PNE) was performed as a diagnostic approach, since all conservative therapies to treat the fecal incontinence had been exhausted. Computed tomography images were recorded beforehand in order to ensure access to the sacral nerves. After a test period of three weeks bowel and urinary conditions improved more than 50%, so that in a second step the permanent electrode and the neurostimulator (Medtronic models 3889 and 3058) were implanted under local anesthesia.

Results: There was a significant improvement in fecal incontinence as well as urinary symptoms up to a follow-up of 28 months. The decrease of symptoms correlated favourably with a significant improvement in her quality of life, since she was now able to finish her apprenticeship.

Conclusion: Sacral neuromodulation is an effective and safe treatment modality for complex combined bowel and urinary disorders subject to spina bi da. Local anesthesia should be preferred because motor responses might be missing as in the current case.

Biography

Ali Al Ghrebawi is currently working in Colorectal Surgery Department, Meppen, Germany.

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