

Evidence Profile 7.1: A Proactive Approach to Bladder and Bowel Management in Adults

**Recommendation 7.1 Evidence Profile (Quantitative)**

**Recommendation question 7:** Should a bowel protocol be recommended to improve outcomes in persons living with fecal incontinence and/or constipation?

**Recommendation 7.1:** The expert panel recommends that health service organizations implement a bowel protocol to manage constipation, which can be individualized.

**Population:** Adults (18 and over) living with constipation or fecal incontinence

**Intervention:** Bowel protocol

**Comparison:** No bowel protocol

**Outcomes:** Constipation, laxative use

**Setting:** long term care, geriatric inpatient rehabilitation

**Bibliography:** 79, 379, 3435

Quality assessment							Study details		No. of participants		Reported effects/outcomes	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Publication Bias	Country	Intervention	Intervention	Control			
<b>Constipation</b> (absence of stool for greater than 72h, data from patient medical records)													
3	Quasi-experimental (before and after)	Serious <sup>a</sup>	Not serious <sup>b</sup>	Not serious	Not serious <sup>c</sup>	Not serious	79: Ireland 379 & 3435: Canada	79: Algorithm for preventing, detecting and treating constipation implemented. Results were compared to a pre-algorithm audit of the unit. 379: Natural bowel care protocol including ground flaxseed, prunes and optimal fluid intake. Results were examined pre and post intervention. 3435: Constipation management protocol (page 20 of article). Results were examined pre and post intervention.	79: pre-intervention: (N=30) 33% constipated Post-intervention: (N=36) 19% of people constipated 379: pre-intervention: (N=12) mean defecation freq.22.33 (SD 27.08) Post-intervention: (N=12) mean defecation freq. 27.08 (SD 16.87) 3435: pre-	79, 379 & 3435: No true control	79: The project resulted in 14% reduction in constipation incidence after implementation of the algorithm 379: However, 75% of study patients maintained or showed an increase in the number of bowel movements per week. 3435: There was no difference in the percentage of persons who experienced constipation before and after implementation of the protocol. However, the average number of incidences of constipation per patient was slightly reduced.  Across the three studies, there was a minimal reduction of constipation rates when a bowel management protocol was implemented.	⊕○○○ VERY LOW	79:Osuafor et al., 2017 379: Davignon et al., 2016 3435: Klein & Holowaty, 2014

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									intervention: (N=137) Pts with constipation = 70.8% & mean incidence per pt. = 1.4 (SD 1.3)  Post-intervention: (N=168) Pts with constipation = 63.1% & mean incidence per pt. = 1.05 (SD 1.1)				
<b>Laxative use</b> (number of pts. prescribed laxatives, laxative/pharmaceuticals for constipation doses per pt.)													
2	Quasi-experimental (before and after)	Serious <sup>a</sup>	Not serious	Not serious	Serious <sup>d</sup>	Not serious	3435 & 379: Canada	379: Natural bowel care protocol including ground flaxseed, prunes and optimal fluid intake. Results were examined pre and post intervention.  3435: Constipation management protocol (page 20 of article). Results were examined pre and post intervention.	379: pre-intervention: (N=12) mean number of dosages = 47.74 (SD 45.46)  Post-intervention: (N=12) mean number of dosages= 21.08 (SD	379 & 3435: No true control group.	379: There was a decrease in pharmaceutical dose used for constipation after implementation of a natural bowel care protocol.  3435: There was a slight decrease in the percentage of patients prescribed laxatives after implementation of a bowel protocol.  Overall, there was a decrease in laxative use after implementation of a bowel protocol.	⊕○○○ VERY LOW	379: Davignon et al., 2016 3435: Klein & Holowaty, 2014

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									26.47)				
									<p>3435: pre-intervention: (N=114) 83.2% pt. prescribed laxatives and ave. 35.25 (SD 36.4) laxative</p> <p>Post-intervention: (N=138) 82.1% pt. prescribed laxatives and ave. 38.54 (SD 48.5) laxative doses per pt.</p>				

Explanations

- a. Downgraded by 1 due to some concerns regarding how studies were conducted.
- b. Downgraded by 0.5 for inconsistency in results. Two bigger studies showed positive effect while one smaller study showed no effect.
- c. Downgraded by 0.5 as total number of participants is close to, but less than the optimum (400).
- d. Downgraded by 1 as total number of participants is less than the optimum (400).