

Neurogenic Bowel Dysfunction

Bowel dysfunction is one of the most physically and psychologically challenging sequelae of Spinal Cord Injury (SCI) because it not only affects morbidity but impacts heavily on quality of life. The ability to voluntarily control the bowel affects the majority of individuals living with SCI.

Neurogenic Bowel is the term used to describe dysfunction of the colon due to loss of normal sensory and/or motor control. Damage to the spinal cord interrupts the neural pathways and the outcomes will vary depending on the location and severity of the damage.

Lack of capacity, awareness, experience and/or training in primary and acute care can lead to healthcare professionals' reluctance to perform neurogenic bowel care on individuals living with SCI.



Context and Challenges

Using an integrated care approach, the National Rehabilitation Hospital (NRH) has developed a comprehensive neurogenic bowel policy based on the lived experience of all parties involved.

This policy has been put in place in the NRH to ensure safe and consistent messaging and information for all levels of care from patient, through to carers, to primary care onto acute care.

However, the NRH policy only directly applies to the spinal cord injury patients that attend the NRH.

Spinal cord injured patients continue to face barriers accessing appropriate neurogenic bowel care in Ireland.

Due to the lack of national guidelines healthcare professionals will continue to face challenges in providing safe neurogenic bowel care.

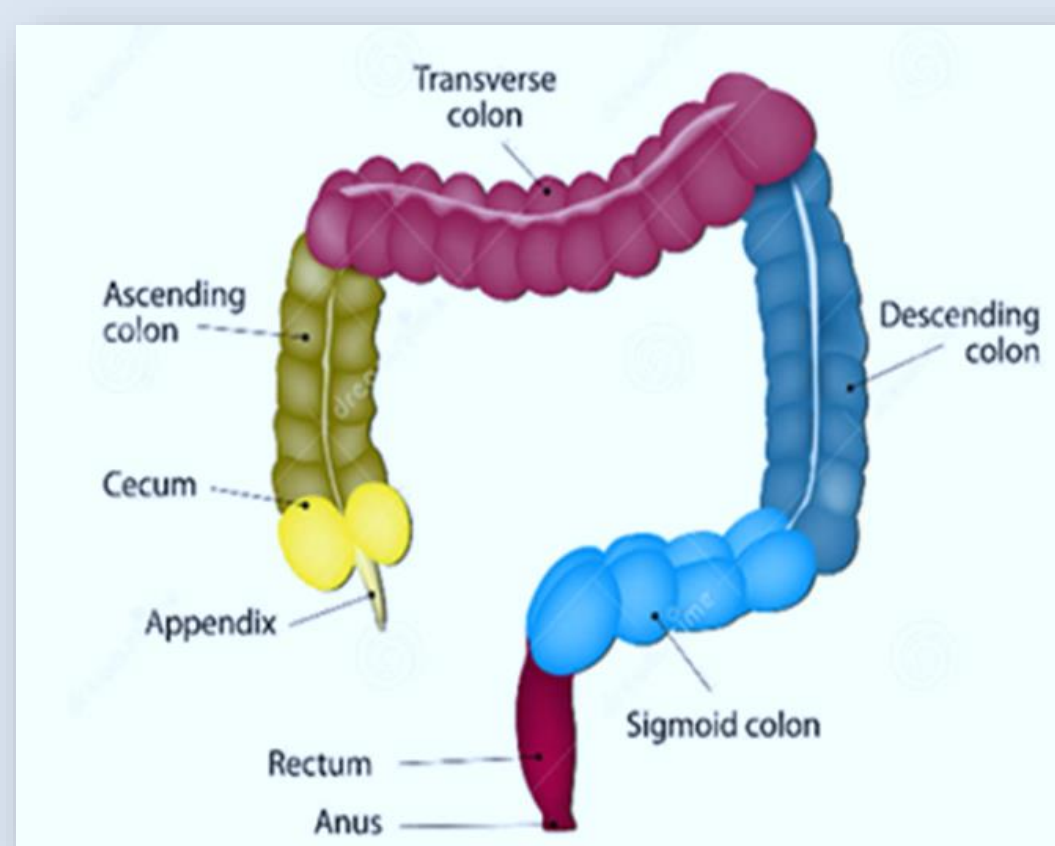


FIGURE 1: Anatomy of the Colon © NRH

Discussion

There is an urgent need for **National Neurogenic Bowel Guidelines** endorsed by the Irish Health Service Executive (HSE) to ensure consistent and safe quality of care across the country.

- Systematic review is required at national level to develop an integrated approach
- Awareness programme on the complications that occur due to poor neurogenic bowel management
- Dedicated education at undergraduate level for all medical healthcare professional students
- Mandatory standardised training for nurses
- Regulation of revision courses
- Standardisation of competency assessment

Consequences


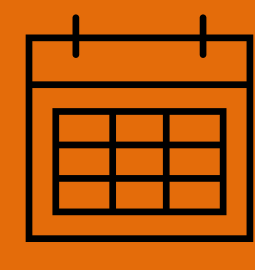
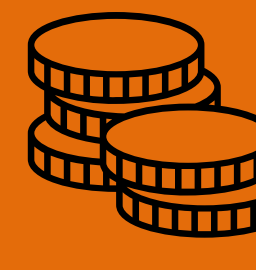

			
4 NRH in-patients	936 DTCO bed days	€1,262 Average bed day cost 2019-23	€1,181,232 Cost to HSE

TABLE 1: Data supplied by NRH

Snapshot of 4 NRH patients with Delayed Transfers of Care (DTCO) (2019 – 2023) as a **direct result of inaccessible neurogenic bowel care** led to 936 additional days spent in-patient in the NRH = **2.56 years**



This delays access to rehabilitation

29th February 2024

- 40** spinal care in patients
- 39** highly complex patients on the waiting list for the NRH
- 2** delayed transfers of care as a direct result of inaccessible bowel care in the community



Mismanagement of bowel care leads to a number of additional complications:

- Autonomic dysreflexia
- Pressure injuries
- Dermatitis
- Mucosal damage
- Sepsis
- Incontinence/ constipation
- Mental health issues

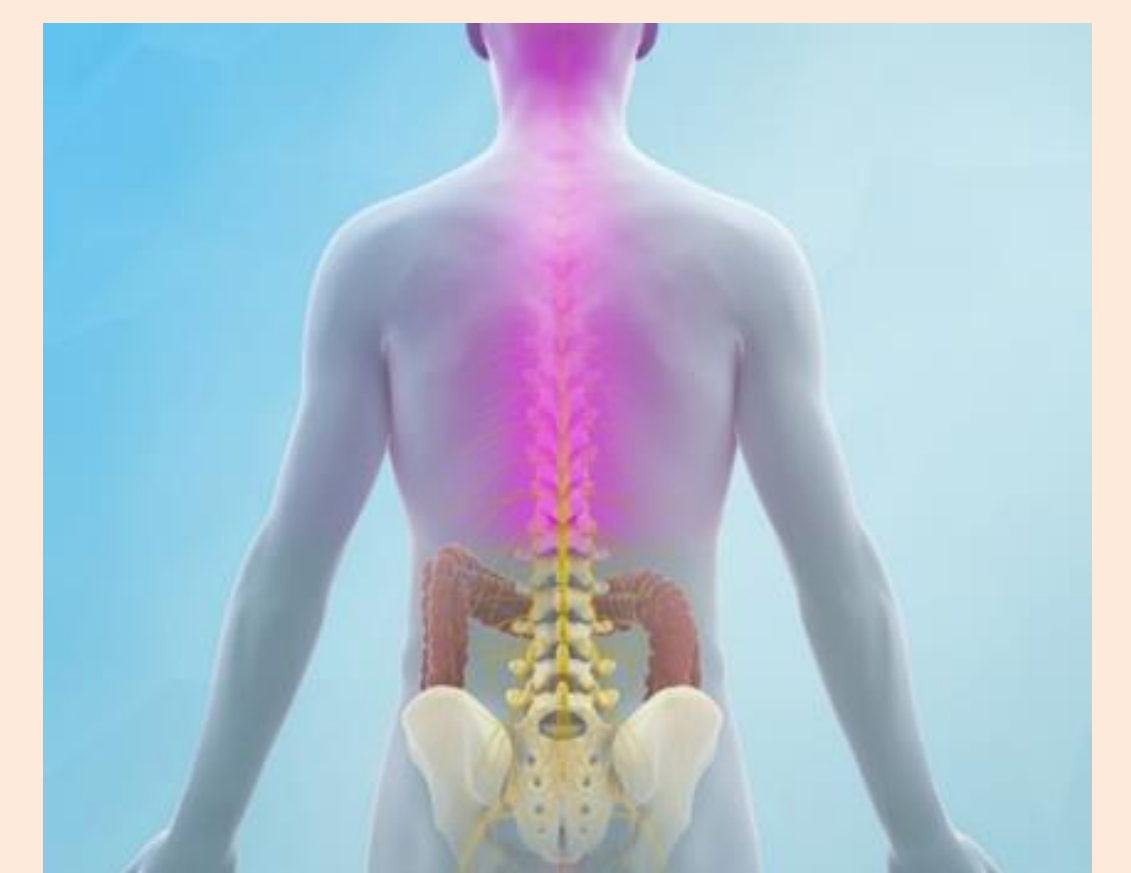


FIGURE 2: The Vertebral Canal © NRH

Contact: paula.keane@nrh.ie

All images reproduced with permission of NRH.