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About Fecal Incontinence

Fecal incontinence is loss of control over bowel movements. Diarrhea is short-term loss of bowel control and can happen to anyone as an isolated event. Some people experience constant loss of gas (flatus) without awareness, which is called anal (gas) incontinence. Loss of bowel control can also occur as a result of:

- childbirth or traumatic injury to the rectal area
- irritation or infection of the rectum, anus, or the surrounding area
- spinal cord injury
- brain condition such as head injury, stroke, or coma
- chronic constipation (can cause the muscles of the rectum and intestines to stretch and weaken)
- Alzheimer's disease or other dementias

Treatment Options depend on the cause

Many people benefit from behavioral techniques and/or exercise. These include:

- exercises for the sphincters and pelvic floor muscles
- learning proper bowel health maintenance
- proper toileting positioning
- dietary factor management
- bowel retraining / learning control techniques

Surgery

Surgery may be needed to repair the muscle at the opening of the rectum. Another type of surgery is a colostomy. A colostomy attaches part of the colon to an opening in the wall of the abdomen. Bowel movements then pass through this opening instead of the rectum. They are collected in a bag outside the body.

Medication

A person can usually control stool better when it is firm rather than loose or liquid. Sometimes taking medications to change the consistency of the stool can provide relief. Over-the-counter anti-diarrhea medications may include Imodium, and prescription medications may include Lomotil. These medications should be discussed with your physician prior to use.