

# Sacral nerve stimulation or anal bulking therapy for faecal incontinence - a comparative study

<b>Submission date</b> 05/12/2012	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 10/01/2013	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 25/06/2020	<b>Condition category</b> Digestive System	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

Faecal incontinence is a common disease with considerable reduction of quality of life. Sacral nerve stimulation (SNS) and anal bulking therapy (ABT) are two treatments that have been developed during the last 10 years and are now frequently used. No proper comparison has been made between the two. The aim of this study is to compares the two treatments.

### Who can participate?

Adult persons with faecal incontinence. The person fills out an incontinence diary during 3 weeks. A minimum of two episodes of faecal incontinence per week is required for participation. People with specific concurrent diseases ( eg previous rectal resection, inflammatory bowel disease) cannot participate.

### What does the study involve?

Participants are randomly allocated to one of two treatments (SNS or ABT). After the treatment (surgery) the patients are followed for one year. During this time they fill out incontinence diaries and a questionnaire that evaluates Quality of Life. Minor or major adverse events are recorded.

### What are the possible benefits and risks of participating?

Both treatments are part of regular health care and the risks are minor. The aim of the study is just the comparison of two treatment. There is no actual benefit for the patient. He/she gets a treatment for faecal incontinence.

### Where is the study run from?

Gothenburg and Uppsala, Sweden. Hopefully one or two additional centres in Sweden and/or Norway will take part.

### When is the study starting and how long is it expected to run for?

The study will start during Spring 2013 and is scheduled to end in 2 to 3 years.

### Who is funding the study?

HTA-center, Gothenburg and Sahlgrenska University Hospital (Sweden)

Who is the main contact?  
Dr Lars Börjesson  
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## Contact information

**Type(s)**  
Scientific

**Contact name**  
Dr Lars Börjesson

**Contact details**  
Sahlgrenska University Hospital  
Department of Surgery  
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Sweden  
416 85

## Additional identifiers

**Protocol serial number**  
N/A

## Study information

**Scientific Title**  
Sacral nerve stimulation vs anal bulking for faecal incontinence - a randomised controlled trial

**Study objectives**  
There is a difference in efficacy between the treatments.

**Ethics approval required**  
Old ethics approval format

**Ethics approval(s)**  
Gothenburg University Research Ethics Committee, 04 December 2011, ref: 858-11

**Study design**  
Multicenter interventional randomised controlled trial

**Primary study design**  
Interventional

**Study type(s)**  
Treatment

**Health condition(s) or problem(s) studied**  
Faecal incontinence in adults

**Interventions**

Two interventional arms:

1. Sacral nerve stimulation
2. Anal bulking therapy

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome(s)**

Responding (> 50% reduction of the number of fecal incontinence episodes compared to baseline) proportion after one year after randomisation.

**Key secondary outcome(s)**

1. Change in number of faecal incontinence episodes
2. Change in deferring time
3. Change in incontinence score
4. Change in Quality of Life
5. Adverse events

**Completion date**

01/03/2015

**Eligibility****Key inclusion criteria**

1. Patients with fecal incontinence with > or = 2 episodes of fecal incontinence/week.
2. > 18 years
3. Insufficient effect of conservative treatment (physiotherapy, diet, drugs).
4. At least one year duration of symptoms
5. At least one year after vaginal delivery
6. Ability to confirm informed consent

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Sex**

All

## **Key exclusion criteria**

1. Complete external sphincter defect (at least 90 degrees, whole length of the anal canal evaluated by physical examination of ultrasound).
2. Ongoing anorectal infection
3. Active inflammatory bowel disease
4. Anorectal implant.
5. Anorectal surgery within the last 12 months.
6. Mucosal prolaps (gr 3-4)
7. Rectal prolaps
8. Ongoing malignant disease
9. Ongoing immunosuppressive treatment
10. Treatment with warfarin
11. Rectal anastomosis
12. Neurologic disease (MS, ALS, Myelomeningocele etc.)
13. Previous pelvic radiotherapy
14. Ongoing anorectal pain
15. Included in other RCT
16. Pregnancy
17. Previously treated with any of the two alternatives in the study
18. Concurrent condition or disease that makes the person unsuitable for the study according clinical judgement of the investigator (eg not likely to follow the study protocol).

## **Date of first enrolment**

01/03/2013

## **Date of final enrolment**

01/03/2015

## **Locations**

### **Countries of recruitment**

Sweden

### **Study participating centre**

**Sahlgrenska University Hospital**

Gothenburg

Sweden

416 85

## **Sponsor information**

### **Organisation**

Sahlgrenska University Hospital (Sweden)

**ROR**

<https://ror.org/04vgqjj36>

## Funder(s)

### Funder type

Hospital/treatment centre

### Funder Name

Sahlgrenska University Hospital (Sweden)

## Results and Publications

### Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes