

Unmet need for improved treatment of neurogenic bowel dysfunction in a non-hospital setting

Sloth DS S, MD¹, *Baunwall S*, MD¹, *Emmanuel A*, Professor², *Christensen P*, Professor¹, *Krogh K*, Professor¹

¹ Aarhus University Hospital, Denmark

² University College Hospital, London, UK

INTRODUCTION

Neurogenic bowel dysfunction (NBD) is common among persons with spinal cord injury (SCI). Unfortunately, treatment is often insufficient and many patients are not referred for specialist evaluation. The Monitoring Efficacy of Neurogenic Bowel Dysfunction Treatment on Response (MENTOR) is a simple and validated tool to facilitate decision making in individual patients with NBD. Results from the MENTOR are graded into Monitor (green), Discuss change in treatment (yellow) or Act/change treatment (red). The aim of the present study was to describe decision making recommended by the MENTOR in a non-hospital setting.

METHODS

A questionnaire describing background data and the MENTOR was sent to all members of the Danish Paraplegic Association.

RESULTS

Among 1316 members, 716 (54%) responded (age 18-92 years (median 61)). Based on the MENTOR, the recommended clinical decision was monitor/no change in 281 (44%), discuss change in treatment in 175 (27%) and act/change treatment in 181 (28%). The need to discuss or change treatment was associated with age ($p=0.02$) and impaired participation in social activities or work ($p=0.0001$).

CONCLUSION

A high proportion of persons with SCI have an unmet need for improved treatment of NBD. The MENTOR holds promise as a simple tool to guide clinical management of NBD.