

Traversing Transanal Irrigation

A CLINICAL GUIDE



Proudly developed by BrightSky, Australia's
leading continence support destination



1

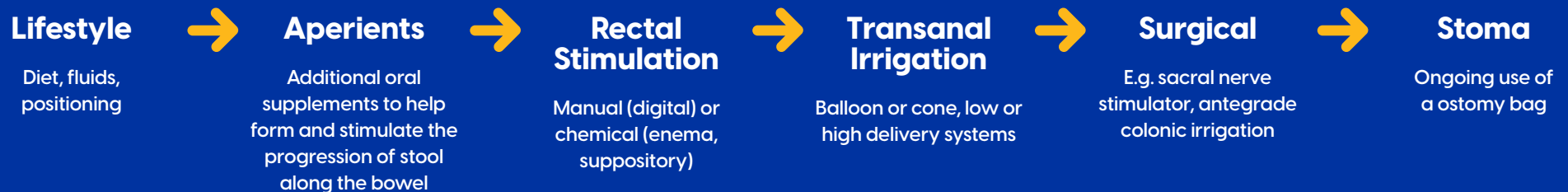
Neurogenic Bowel and Transanal Irrigation

A neurogenic bowel results in changes to how stool is processed through the bowel and eliminated. A neurogenic related faecal incontinence program is designed to preserve bowel function, minimise complications and should be compatible with a person's lifestyle choices. A neurogenic bowel is generally managed via an individually designed program. Such a program should be designed by a continence expert with disability experience.

Generally speaking transanal irrigation is not the first line approach for management of neurogenic bowel dysfunction. There is a progression of intervention steps when establishing a neurogenic bowel program (see diagram below). Traditional conservative approaches will commence with changes to diet, however this may not be successful and further invasive intervention may be required. Following a thorough assessment, transanal irrigation may be an option to consider when aperients and rectal stimulation are not working.

It is important to continue to assess and monitor approach taken, so further intervention steps can be introduced when the bowel program is not successful. "Transanal irrigation should be considered early in patients with moderate to severe neurogenic bowel dysfunction if conservative treatment modalities fail, ..." ¹

NEUROGENIC BOWEL INTERVENTION PROGRESSION



1. <https://www.wics.org/Workshops/HandoutFiles/OOO533.pdf>

2

Transanal Irrigation Risk

Perforation is a recognised risk of transanal irrigation. Transanal irrigation is contraindicated for use in individuals where conditions exist that increase the risk of perforation. Thorough individualised assessment for use and hands-on training are needed prior to an individual using transanal irrigation.

3

Transanal Irrigation Contraindications for Use²

Absolute Contraindications	Relative Contraindications
Anal or rectal stenosis	Severe diverticulosis: Diffuse disease, Dense sigmoid disease, Previous diverticulitis or diverticular abscess
Active inflammatory bowel disease	Long-term steroid medication
Acute diverticulitis	Radiotherapy to the pelvis
Colorectal cancer	Prior rectal surgery
Within 3 months of rectal surgery	Faecal impaction
Within 4 weeks after endoscopic polypectomy	Painful anal conditions
Ischaemic colitis	Current or planned pregnancy
	Bleeding diathesis or anticoagulant therapy (not including aspirin or clopidogrel)
	Severe autonomic dysreflexia

2. Emmanuel, AV, Krogh, K, Bazzocchi, G, Leroi, A M, Bremers, A, Leder, D, ... & Coggrave, M. (2013). Consensus review of best practice of transanal irrigation in adults. Spinal cord, 51(10), 732.

4

Approval to Use and Associated Training

An individualised assessment from an appropriately qualified clinician is required to ascertain whether transanal irrigation is an appropriate option for use. Check with manufacturers recommendations whether additional medical approval is required prior to commencement of a client on transanal irrigation. Training and initial monitoring of appropriateness of transanal irrigation is essential, and this should be outlined not only to the client but also in accordance with funding requirements. Manufacturers of transanal irrigation also provide client use guides that can be requested to assist with the training you provide. The frequency of training required and post use follow up will vary from client to client and will need to be validated as per funding body requirements.

5



Brand Selection Range

Currently within Australia there is a selection of transanal irrigation systems available for sale. Those readily available include Peristeen and Aquaf flush. The main differences are whether they are a low or high volume delivery system and/or inserted via a cone or rectal catheter. Following a thorough neurogenic bowel assessment, recommendations on the most suitable for use for the individual may be made. When deciding which system is best suited to the individual you will need to consider the amount of fluid required and whether a balloon catheter or cone system is required.

- ✓ A cone style product is held in place manually throughout the instillation process. If the individual experiences; irritation from the balloon, routine balloon popping, dysreflexia on inflation of balloon, a cone style product that is manually held in place may be of more benefit. [See page 5]
- ✓ A rectal catheter with balloon is designed to hold the rectal catheter in place and provide a seal. [See page 6]

6 Prescribing Transanal Irrigation

When prescribing transanal irrigation for use it is also important to outline the associated ongoing equipment needs, as insufficient product or product used beyond design may impact success in ongoing use of transanal irrigation. Below is an outline of associated equipment usage for daily use based on current manufacturing guidelines.

AQUAFLUSH TRANSANAL IRRIGATION (CONE SYSTEM) BAG SYSTEM – HIGH VOLUME DELIVERY; PUMP WITH NO BAG – LOW VOLUME DELIVERY

When using Aquaflush ongoing you will require both the starter kit and the monthly kit. Each kit contains 1 lubricant sachet per cone. The monthly kit does not include the washbag, leg strap, extension tube and S hook. These recommendations assume a daily bowel program with equipment being ordered every 3 months and allows for a spare water bag and 5 extra cones per 3 months. Following an assessment should the client require more or less than a daily transanal irrigation then the 3 monthly quantities would need to be adjusted accordingly.

BSA code	Product	Content	Usage (as per manufacture and or importer guidelines)	What is required if on a daily bowel program
Pump with no bag - Low Volume Delivery				
223300	Aquaflush Compact starter kit	Silicone Cone x 5, Hand pump (100ml) assembly with quick connectors (one way valve)	3 re-uses of cone per single day Monthly	1 per 3 months
223305	Aquaflush Compact monthly kit	Silicone Cone x 15, Hand pump (100ml) assembly with quick connectors (one way valve)	3 re-uses of cone per single day Monthly	6 per 3 months
223350	Aquaflush compact plus starter Kit	Silicone cone x 5, Elbow connector, Extension tubing, Large pump (200ml), Small washbag	3 re-uses of cone per single day Monthly	1 per 3 months
223355	Aquaflush compact plus monthly Kit	Silicone cone x 15, Elbow connector, Extension tubing, Large pump (200ml), Small washbag	3 re-uses of cone per single day Monthly	6 per 3 months
Bag System – High Volume Delivery				
223320	Aquaflush Lite starter kit	Silicone Cone x 7, 2L water bag includes (Hand pump/tube assembly, Control tap Connectors & one way valve), Washbag for storage, Leg strap, Extension tube, Bag stand, S Hook for hanging bag	3 re-uses of cone per single day Monthly	1 per 3 months
223325	Aquaflush Lite monthly kit	Silicone Cone x 16, 2L water bag (Hand pump/tube assembly, Control tap, Connectors & one way valve)	3 re-uses of cone per single day Monthly	6 per 3 months
223340	Aquaflush Actif starter kit (Paediatric or stoma irrigation)	Silicone Cone x 5, 2L water bag (Hand pump/tube assembly, Control tap, Connectors & one way valve, Washbag for storage, Leg strap, Extension tube, Bag stand, S Hook for hanging bag)	3 re-uses of cone per single day Monthly	1 per 3 months
223345	Aquaflush Actif monthly kit (Paediatric or stoma irrigation)	Silicone Cone x 15, 2L water bag (Hand pump/tube assembly, Control tap, Connectors & one way valve)	3 re-uses of cone per single day	Monthly
Replacement equipment only should above quantities not be sufficient following assessment				
223330	Cone pkt	Silicone Cones x 15	3 re-uses of cone per single day	
223335	Extension tube pkt	2 extension tubes	1 x tube monthly	

PERISTEEN TRANSANAL IRRIGATION (CATHETER SYSTEM) BAG SYSTEM – HIGH VOLUME DELIVERY

These recommendations assume a daily bowel program with equipment being ordered every 3 months and allows for a spare water bag and catheter per 3 months. Following assessment additional rectal catheters can be sourced (149145 or 149150). Should the client require more or less than a daily transanal irrigation the then 3 monthly quantities of Peristeen transanal accessory pack (149135 or 149115) would need to be adjusted accordingly.

BSA code	Product	Content	Usage (as per manufacture and/or importer guidelines)	What is required if on a daily bowel program
149125	Peristeen anal irrigation system (regular)	1 Grey Bag		1 per 3 months
		1 Control Unit (hand pump with blue tubes)	90 uses	
		1 Water Bag	15 uses	
		1 Lid for the Water bag	90 uses	
		2 Rectal Hydrophilic catheters (regular)	Single use	
		2 Straps		
		1 IFU		
149120	Peristeen anal irrigation system (small)	1 Grey Bag		1 per 3 months
		1 Control Unit (hand pump with blue tubes)	90 uses	
		1 Water Bag	15 uses	
		1 Lid for the Water bag	90 uses	
		2 Rectal Hydrophilic catheters (small)	Single use	
		2 Straps		
		1 IFU		
149135	Peristeen anal Irrigation accessory pack/unit (regular)	1 Water bag	15 uses	6 per 3 months
		15 Rectal Hydrophilic catheters (regular)	Single use	
		1 IFU		
149115	Peristeen anal irrigation accessory pack/unit (small)	1 Water bag	15 uses	6 per 3 months
		15 Rectal Hydrophilic catheters (small)	Single use	
		1 IFU		
149145	Peristeen anal irrigation rectal catheter pack (regular)	10 Rectal Hydrophilic catheters (regular) 1 IFU	Single use	1 per 3 to 6 months depending on client need. (This is prescribed if additional catheters are needed due to balloon popping. Note additional catheters come with the accessory pack which is inclusive of the required water bag)
149150	Peristeen anal irrigation rectal catheter pack (small)	10 Rectal Hydrophilic catheters (small) 1 IFU	Single use	
149165	Peristeen anal irrigation tubes	2 tubes with blue connectors	90 uses	Comes with system these are replacement tubes if required
		1 IFU		

Specialist healthcare products delivered to your door

Another bright idea from Australia's
leading continence support destination

Phone: 1300 88 66 01

Email: orders@brightsky.com.au

brightsky.com.au

