

Accidental Bowel Leakage (Fecal Incontinence)

WARWIKI

Patient Information · Losing control of gas or stool — common and treatable

Accidental bowel leakage means losing control of gas or stool — leaking before you reach the toilet, or without realizing it. It is far more common than people think, especially after childbirth or with age, and it is treatable. There is nothing to be embarrassed about, and telling your team is the first step to getting better.

About This Condition

Control of stool depends on the **anal sphincter muscles**, the pelvic floor, stool consistency, and the nerves that coordinate them. A problem with any of these can cause leakage — from staining and gas to loss of formed stool.

What Causes It

- **Sphincter injury** — often from childbirth (a severe tear) or prior anal surgery
- **Loose stool or diarrhea** — harder to hold than formed stool
- **Severe constipation** with overflow leakage around hard stool
- **Nerve problems**, rectal prolapse, or irritable bowel

Often more than one factor is at play, and several can be improved.

LEARN THE TERMS

Fecal incontinence

Accidental loss of gas or stool.

Anal sphincter

The ring of muscle that holds stool in until you choose to go.

OASIS

A severe (3rd/4th-degree) childbirth tear involving the sphincter.

Fiber

Bulking agent that firms loose stool and eases leakage.

Biofeedback

Therapy that retrains the pelvic-floor and sphincter muscles.

Sacral neuromodulation

A nerve-stimulation treatment that can improve control.

IS THERE REALLY ANYTHING THAT HELPS? Yes — most people improve a lot, often with simple steps like firming the stool and retraining the muscles. More advanced options work well when needed. The hardest part is bringing it up; once you do, there is a clear path to better control.

How It's Diagnosed

- A history of how often, how much, and what triggers leakage
- An exam of the anal sphincter and pelvic floor
- Sometimes an ultrasound of the sphincter, anorectal testing, or a scope

How It's Treated (Step by Step)

- 1 **Stool control** — add fiber to firm the stool, treat diarrhea or constipation, and set a regular bowel routine.
- 2 **Pelvic-floor therapy / biofeedback** to strengthen and coordinate the muscles.
- 3 **Medicines** (such as anti-diarrheals) when stool is loose.
- 4 **Advanced options** — sacral neuromodulation, an injectable bulking agent, or sphincter repair.

Living With It

- Aim for **well-formed stool** with fiber and steady fluids.
- Empty at regular times; protect the skin and carry supplies for confidence.
- Track which foods worsen leakage (caffeine, spicy, artificial sweeteners).

Call your team if you have:

- **Blood in the stool**, or black, tarry stools
- A new or marked change in bowel habits, or unexplained weight loss
- Fever or severe abdominal pain

THREE THINGS TO REMEMBER

1. Accidental bowel leakage is common and treatable — not something you have to live with or stay silent about.
2. Treatment starts with firming the stool and retraining the muscles, then steps up to nerve stimulation or repair if needed.
3. Tell your team — it's the key step. Report blood in the stool, weight loss, or a big change in bowel habits.