



Journal of Coloproctology

www.jcol.org.br



Original Article

There is an agreement between constipation referred and that documented by objective criteria?☆



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ARTICLE INFO

Article history:

Received 24 February 2016

Accepted 11 April 2016

Available online 27 April 2016

Keywords:

Constipation

Rome criteria

Kappa index

ABSTRACT

Introduction: Chronic constipation is the most common digestive complaint at the doctor's office, with high prevalence in the population. However, many patients – and even those physicians not so familiar with pelvic floor disorders – define and consider constipation based on intestinal functionality and stool consistency. But symptoms of incomplete defecation, digital maneuvers, abdominal discomfort, and straining should not be overlooked.

Objectives: To investigate the correlation between constipation referred and documented through objective criteria in patients admitted on a daytime-nursing ward basis at the Hospital Santa Marcelina, São Paulo.

Methodology: This is a prospective study of a random sample of patients admitted on a daytime-ward hospitalization basis at Santa Marcelina Hospital to perform minor surgical procedures not related to functional disorders of the gastrointestinal tract in the period from September 2014 to June 2015; the only exclusion criterion was “not agreed to participate in the interview conducted by students of medicine at Santa Marcelina Medical School”.

Results: 102 patients were randomly analyzed in the period considered (51% female) with a mean overall age of 48.6 (19–82) years. Constipation has been reported spontaneously by 17.6% of participants and denied by 82.4%. With the implementation of the Cleveland Clinic's criteria for the diagnosis of constipation, the compliance with the referred symptomatology

☆ Study conducted by the Academic League of General Surgery, Santa Marcelina Medicine School; and by the Medical Residency Program of Coloproctology, Department of General Surgery, Santa Marcelina Hospital, São Paulo, SP, Brazil.

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<http://dx.doi.org/10.1016/j.jcol.2016.04.004>

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was 88.9%; the same value was found with the use of the Rome III criteria (Kappa = 0.665). In addition, a higher incidence of constipation was observed in female patients ($p = 0.002$). **Conclusion:** A higher incidence of constipation was observed in female participants, with no statistical difference with respect to age. Furthermore, a substantial agreement was found between constipation referred and constipation documented through objective criteria.

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Existe concordância entre constipação referida e constatada por critérios objetivos?

R E S U M O

Palavras-chave:

Constipação intestinal
Critérios de Roma
Índice de Kappa

Introdução: A constipação intestinal crônica representa a queixa digestiva mais comum no consultório com elevada prevalência na população. No entanto, frequentemente, os pacientes e mesmo os médicos, não são afetados com os distúrbios do assoalho pélvico, definem e consideram constipação baseados na funcionalidade intestinal e consistência das fezes. Entretanto, os sintomas de defecação incompleta, manobras digitais, desconforto abdominal e esforço evacuatório não devem ser negligenciados.

Objetivos: Verificar a correlação entre constipação intestinal referida e constatada através de critérios objetivos em pacientes internados em regime de enfermaria dia no Hospital Santa Marcelina, São Paulo.

Metodologia: Estudo prospectivo de amostra aleatória de pacientes internados em enfermaria dia do Hospital Santa Marcelina para realização de cirurgias de pequeno porte e não relacionadas a distúrbios funcionais de trato gastrointestinal no período entre setembro de 2014 e junho de 2015, cujo único critério de exclusão foi o não consentimento em participar da entrevista realizada pelos alunos do curso de medicina da Faculdade Santa Marcelina.

Resultados: Foram analisados de forma aleatória 102 pacientes no período sendo 51% do sexo feminino e média de idade global de 48,6 anos (19-82 anos). A constipação foi referida de forma espontânea em 17,6% e negada em 82,4%. Ao se utilizar o critério da Cleveland Clinic para constatar constipação houve uma concordância com o sintoma referido fora de 88,9%, com mesmo valor ao se utilizar os critérios de Roma III (Kappa = 0,665). Além disso, verificou-se maior incidência de constipação intestinal nos pacientes do sexo feminino ($p = 0,002$).

Conclusão: Verificou-se maior incidência de constipação no sexo feminino sem diferença estatística baseado na idade. Além disso, constatou-se concordância substancial entre a constipação referida e a documentada através de critérios objetivos.

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Introduction

Chronic constipation is the most common digestive complaint in the general population, with high prevalence,¹ affecting 16% of adults and up to 33% of those aged above 60 years,² especially female subjects.³ Consequently, this is a morbidity that implies a large number of visits for medical care, although in most cases there is no threat to the patient's life nor debilitation, but with a change in his/her quality of life, especially in chronic cases.^{2,4}

Constipation is classified into primary and secondary types. In a primary constipation, one can verify a normal intestinal transit, outlet obstruction, or a slow colonic transit. On the other hand, the secondary type of constipation is caused by a metabolic disease or may have a mechanical,

pharmacological or psychiatric cause.^{5,6} Moreover, the main risk factors for constipation are already known: aging, female gender, depression, inactivity, low caloric intake, low income and low educational level, physical and sexual abuse, and previous surgeries.⁶

Often the patient – and even that physician not so familiar with pelvic floor disorders – defines and considers constipation based on intestinal functionality and stool consistency.⁷ But symptoms of incomplete defecation, digital maneuvers, abdominal discomfort and straining should not be overlooked.⁸

Thus, in order to standardize the diagnosis and management of constipation, researchers described objective data in order to ascertain (or not) the morbidity by Rome I, II, III criteria⁹⁻¹¹ and by the Cleveland Clinic constipation index.¹²

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