# digital examination versus Endoanal ultrasound for fecal incontinence in FI patients

# **Review information**

#### **Authors**

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#### **Contact person**

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#### **Dates**

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Date of Search:	
Next Stage Expected:	
Protocol First Published:	Not specified
Review First Published:	Not specified
Last Citation Issue:	Not specified

#### What's new

Date / Event	Description
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#### **History**

Date / Event	Description
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# Abstract

#### Background

#### **Objectives**

#### **Search methods**

digital examination versus Endoanal ultrasound for fecal incontinence in FI patients 19-Aug-2014 Selection criteria

Data collection and analysis

Main results

**Authors' conclusions** 

## **Plain language summary**

[Summary title] [Summary text]

## Background

Target condition being diagnosed

Index test(s)

**Clinical pathway** 

Prior test(s)

Role of index test(s)

Alternative test(s)

Rationale

# **Objectives**

digital examination versus Endoanal ultrasound for fecal incontinence in FI patients 19-Aug-2014

#### **Secondary objectives**

# **Methods**

Criteria for considering studies for this review *Types of studies* 

**Participants** 

Index tests

**Target conditions** 

**Reference standards** 

Search methods for identification of studies

**Electronic searches** 

Searching other resources

**Data collection and analysis** 

Selection of studies

Data extraction and management

Assessment of methodological quality

Statistical analysis and data synthesis

digital examination versus Endoanal ultrasound for fecal incontinence in FI patients 19-Aug-2014 *Investigations of heterogeneity* 

Sensitivity analyses

Assessment of reporting bias

**Results** 

**Results of the search** 

Methodological quality of included studies

**Findings** 

# **Discussion**

Summary of main results

Strengths and weaknesses of the review

Applicability of findings to the review question

## **Authors' conclusions**

Implications for practice

Implications for research

# **Acknowledgements**

# **Contributions of authors**

# **Declarations of interest**

# **Differences between protocol and review**

# **Published notes**

## **Characteristics of studies**

#### **Characteristics of included studies**

#### Dobben AC 2007

#### **Patient Selection**

A. Risk of Bias		
Patient Sampling	Cohort, prospective patients (n= 312, 90% women) with FI	
Was a consecutive or random sample of patients enrolled?		Yes
Was a case-control design avoided?		Yes
Did the study avoid inappropriate exclusions?		Yes
Could the selection of patients have introduced bias?		Low risk

B. Concerns regarding applicability		
Patient characteristics and setting	The majority was female but patients are only included if they have been through conservative treatment with no effect. This might cause a risk of bias	
Are there concerns that the included patients and setting do not match the review question?		Unclear concern

#### **Index Test**

Index tests	Digital anal examination
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#### All tests

A. Risk of Bias	
Were the index test results interpreted without knowledge of the results of the reference standard?	Unclear
If a threshold was used, was it pre-specified?	
Could the conduct or interpretation of the index test have introduced bias?	Unclear risk

B. Concerns regarding applicability	
Are there concerns that the index test, its conduct, or interpretation differ from the review question?	Low concern

#### **Reference Standard**

A. Risk of Bias		
Target condition and reference standard(s)	arget condition and reference standard(s) Standard methods detecting changed structure or disrupti	
Is the reference standards likely to correctly classify the target condition?		Yes
Were the reference standard results interpreted without knowledge of the results of the index tests?		Unclear
Could the reference standard, its conduct, o introduced bias?	r its interpretation have	Unclear risk

B. Concerns regarding applicability	
Are there concerns that the target condition as defined by the reference standard does not match the question?	Unclear concern

#### Flow and Timing

A. Risk of Bias		
Flow and timing	Eleven patients dropped out. Reasons not described. Not possible to conclude anything about any timelapse between the different examinations	
Was there an appropriate interval between index test and reference standard?		Unclear
Did all patients re	eceive the same reference standard?	Yes
Were all patients	included in the analysis?	Yes
Could the patier	nt flow have introduced bias?	Low risk

#### Notes

Notes	The Netherlands, Financial support was granted by The Netherlands Organization for Health Research and Development ZON MW.
	Grant 945-01-013, 2001.

### Jeppson PC 2012

#### **Patient Selection**

A. Risk of Bias	
Patient Sampling	Electronic medical records of all patients who presented to a tertiary care urogynecology clinic and evaluated by endoanal ultrasound were reviewed. A total of 112 patients were evaluated for fecal incontinence and received endoanal ultrasound during the study period. After the exclusion criteria were reviewed, 74

patients were included as the subjects of this report.	
Was a consecutive or random sample of patients enrolled?	Unclear
Was a case-control design avoided?	Yes
Did the study avoid inappropriate exclusions?	Unclear
Could the selection of patients have introduced bias	Unclear risk

B. Concerns regarding applicability		
Patient characteristics and setting	After approval by the institutional revelectronic medical records of all patients a tertiary care urogynecology clinic a endoanal ultrasound were reviewed. from January 2000 through March 20 histories were reviewed. Patients identified with ahistory of remultiple sclerosis, inflammatory bowel disease syndrome, chronic neurologic conditions urgery such as hemorrhoidectomy, or sphincteroplasty—or the absence the time of evaluation were excluded	ents who presented to and evaluated by Records were reviewed 009.Past medical and surgical ctovaginal fistula, dementia, stroke, se, irritable bowel ions, prior rectal/anal rectal prolapse repair, of standardized DRE at
Are there concerns that the included patients and setting do not match the review question?		Low concern

#### Index Test

Index tests	Digital anal examination
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#### All tests

A. Risk of Bias	
Were the index test results interpreted without knowledge of the results of the reference standard?	No
If a threshold was used, was it pre-specified?	
Could the conduct or interpretation of the index test have introduced bias?	

B. Concerns regarding applicability	
Are there concerns that the index test, its conduct, or interpretation differ from the review question?	Low concern

#### **Reference Standard**

#### digital examination versus Endoanal ultrasound for fecal incontinence in FI patients 19-Aug-2014

A. Risk of Bias		
Target condition and reference standard(s) Endoanal ultrasound		
Is the reference standards likely to correctly classify the target condition?		Yes
Were the reference standard results interpreted without knowledge of the results of the index tests?		No
Could the reference standard, its conduct, or its interpretation	on have introduced bias?	Low risk

B. Concerns regarding applicability	
······································	Low concern
does not match the question?	

#### Flow and Timing

A. Risk of Bias			
Flow and timing	53 days (SD 227) between digital anal examination and endoanal ultrasound		
Was there an appropriate interval between index test and reference standard?		No	
Did all patients receive the same reference standard?		Yes	
Were all patients included in the analysis?		Yes	
Could the patient flow have introduced bias?		Unclear risk	

#### **Notes**

Notes	USA, funding not described
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Footnotes

#### **Characteristics of excluded studies**

Footnotes

#### Characteristics of studies awaiting classification

Footnotes

#### **Characteristics of ongoing studies**

Footnotes

# **Summary of findings tables**

**Additional tables** 

# **References to studies**

**Included studies** 

Dobben AC 2007

[Empty]

Jeppson PC 2012

[Empty]

**Excluded studies** 

**Studies awaiting classification** 

**Ongoing studies** 

## **Other references**

**Additional references** 

Other published versions of this review

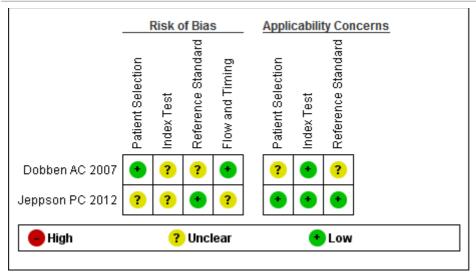
## **Data and analyses**

#### Data tables by test

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# **Figures**

Figure 1



Risk of bias and applicability concerns summary: review authors' judgements about each domain for each included study

# Sources of support

#### **Internal sources**

• No sources of support provided

#### **External sources**

• No sources of support provided

# Feedback

**Appendices**