

MANAGEMENT OF COMPLEX CONSTIPATION WITH SMALL FIBER NEUROPATHY: A CASE STUDY

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Poster

Colorectal

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A 20-year-old female with chronic constipation, incontinence, and anorectal pain since childhood was found to have dyssynergic defecation, slow transit constipation, and ultimately diagnosed with Postural Orthostatic Tachycardia Syndrome and Small Fibre Neuropathy.

KEY POINTS

- The patient presented with chronic constipation, bowel incontinence, anorectal pain since childhood, bloating, nausea, odynophagia, and required frequent hospitalizations for fecal disimpaction.
- Diagnostic workup revealed slow transit on colon transit marker study, fecaloma on colonoscopy, and anorectal manometry showed impaired rectal sensation with perianal hypersensitivity, preserved recto-anal inhibitory reflex, dyssynergic defecation, and slow transit constipation.
- Smartwatch data showing recurrent high heart rates and symptoms of autonomic neuropathy and dysautonomia, including postural tachycardia and heat/cold intolerance, prompted referral to neurology and rheumatology.
- The patient was eventually diagnosed with Postural Orthostatic Tachycardia Syndrome and Small Fibre Neuropathy, conditions known to be associated with gastrointestinal symptoms due to autonomic dysfunction.
- The case authors note this case highlights the importance of recognizing atypical features of constipation that may indicate underlying pathologies requiring further investigation.

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