INTERMITTENT COLONIC EXOPERISTALSIS (ICE) TREATMENT WITH MEDICAL DEVICE IN ADULTS WITH REFRACTORY CONSTIPATION. EARLY REAL-WORLD EXPERIENCE FROM A UK NHS REFERENCE SERVICE.

Gregory Thomas

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An NHS pilot study of intermittent colonic exoperistalsis (ICE), a non-invasive home device for chronic refractory constipation, showed significant improvements in quality of life, symptom burden, and healthcare utilization in preliminary results from 6 patients.

KEY POINTS

- ICE treatment significantly improved PAC-QoL scores (change -0.89, p=0.0397) and PAC-SYM scores (change -1.02, p=0.0236) from baseline to follow-up in 6 patients with chronic constipation.
- GP visits in the last 12 weeks decreased from 3.40 to 0.40 (p=0.0220) and healthcare professional calls decreased from 3.40 to 1.40 (p=0.0150).
- All enrolled patients chose ICE over transanal irrigation at initiation, and adherence was high with most patients wishing to continue treatment beyond the evaluation period.
- Healthcare professionals rated patient understanding and commitment as quite or very high (p<0.0001 and p=0.0002 respectively), with short training time averaging 25.62 minutes, often conducted by phone.
- The study is recruiting 30 patients total; 13 have been recruited with preliminary data reported for 6 completing follow-up and 4 healthcare professionals.

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