

MR Defecography, a Diagnostic Test to Evaluate the Pelvic Floor Motion in Patients with Dyssynergic Defecation after Biofeedback Therapy

Afsaneh Nikjooy*

Department of Physical Therapy, Iran University of Medical Sciences, Tehran, Iran

Short Communication

Dyssynergic defecation (DD) or paradoxical puborectalis contraction syndrome, one of the most common functional defecation disorders which has been observed in up to 50% of patients with chronic constipation, is recognized as a major cause of chronic functional constipation [1].

***Corresponding author:** Afsaneh Nikjooy, Assistant Professor of Physical Therapy, Department of Physical Therapy, Iran University of Medical Sciences, Tehran, Iran, Tel: 982122121075; E-mail: afsanehnikjooy@yahoo.com

Received February 22, 2016; **Accepted** March 11, 2016; **Published** March 14, 2016

Citation: Nikjooy A (2016) MR Defecography, a Diagnostic Test to Evaluate the Pelvic Floor Motion in Patients with Dyssynergic Defecation after Biofeedback Therapy. J Pain Relief 5: 236. doi:[10.4172/2167-0846.1000236](https://doi.org/10.4172/2167-0846.1000236)

Copyright: © 2016 Nikjooy A. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

important point should to remember. In order to appreciate the utility of rectal examination in guiding the diagnosis and also to recognize the prevalence of pelvic floor dysfunction as an etiologic factor for chronic constipation, Tantiphlachiva and colleagues performed a study on digital rectal examination (DRE) and defined the sensitivity and specificity of DRE for detecting dyssynergia in patients with chronic constipation at 75% and 87%, respectively, and the positive predictive value of 97% for the procedure [13]. Therefore, as they also suggest, DRE appears to be a reliable tool for identifying dyssynergia in patients with chronic constipation. Digital rectal examinations can guide and facilitate the selection of appropriate candidates for further physiologic testing and treatment among these patients. Moreover, DRE also was able to differentiate normal, increased, or decreased anal resting pressures as well as anal squeeze pressure in both male and female patients. Furthermore, almost all patients with excessive perineal descent as well as those with a history of digital maneuvers were found to have features of dyssynergia on DRE which were confirmed by anorectal Manometry [13].

Contrary to the general belief that uroscopic examination should yield better results since it is performed in an upright position, it has been shown that no significant difference exists between the results of MR