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Editorial

"You will never walk alone... anymore"☆

«Nunca más caminarás solo...»

Anal incontinence continues to be a functional alteration of maximum socio-health relevance. The reasons are obvious, since, in addition to the high personal cost it implies for patients who suffer from it (isolation and personal alienation),[1,2] it is associated with a significant volume of medical consultations, diagnostic tests,[3] need for surgical treatments, some of which are highly sophisticated,[4,5] and, finally, also a high social impact, being a frequent cause of absenteeism and work incapacity.[6,7]

An additional difficulty is that, due to multiple reasons ranging from concealment by patients, to the multifactorial nature of the disease, it is very difficult to obtain studies with high methodological quality designs that provide first-level clinical evidence.[8] In this context, with the aim of trying to alleviate these difficulties, and the desire to unify criteria and generalise as far as possible the actions carried out on our patients, tools such as consensus documents emerge. The latter can be of extraordinary clinical utility, given that it is impossible to obtain the degree of evidence that would be desirable for everyone to be able to make clinical decisions, in this or any other context.

We are particularly pleased to be able to share the publication of a national Consensus document in this issue of the journal, promoted through the Spanish Association of Coloproctology, and which has brought together 13 of the members with the most experience and greatest interest in Faecal Incontinence in Spain: "Baiona Consensus on Faecal Incontinence: Spanish Association of Coloproctology" (Consensus Citation[9]).

The culmination of this work is the confirmation of two significant eventswhich have developed in our environment in the context of Faecal Incontinence: on the one hand, the enhancement of a classically marginalised pathology[3,10] and, on the other, the progressive increase in the visibility of the problem, which has resulted in greater awareness and preparation in faecal incontinence among specialists in the subspecialty of Coloproctology, and with it a direct impact on the results obtained on patients and their satisfaction with the process.[11,12]

Increasing visibility has been a shared task in which not only professionals with dedication and passion for this pathology have participated, but also increasingly some very brave men and women who have decided to rise to the challenge of their medical condition, changing their own destiny, crossing the peninsula by land, sea and air, organising activities, closing collaboration agreements and ensuring that faecal incontinence acquires the importance it deserves. This work has been carried out by ASIA (Association of Patients with Anal Incontinence)[13] through its tireless and invaluable efforts. One of the most notable milestones has been the establishment of World Continence Week in Spain, an event that has been celebrated since 2019 and that has had a highly significant impact. This achievement is the result of ASIA's collaboration and commitment with the medical community, demonstrating that the union between patients and professionals can achieve greater notoriety.

ASIA's mission is clear. Over the last decade, we have worked tirelessly to fulfil our commitment to providing solid, consistent and accessible support to patients affected by faecal incontinence. The organisation has grown from its origins in Catalonia to extend its presence to multiple communities throughout Spain, responding to more than 3,000 queries a year from people across the country seeking help. It is because of them that we continue to work daily, forming a team with health professionals. Indeed, ASIA represents an active part in various research programmes, since the patient's perspective is also crucial in this field and this is how we intend to represent it.

It seems that the work model developed is appropriate, since the results obtained have been considerable in recent years. The multiple experiences shared at Medical Congresses and other forums have made it possible to identify common objectives: avoiding delays in diagnosis and providing adequate information regarding therapeutic options. In this sense, maintaining the same work model, efforts are being directed beyond specialised medicine, to achieve the following

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challenges that are considered of vital importance: continuity of care and general health education.

In response to these needs, ASIA has promoted the organisation of training sessions for training and early recognition in primary care and nursing, joining forces with various Scientific Associations (SEMG, SEMERGEN, SEMFIC, AIFFIC) with the aim of creating a Comprehensive Roadmap that provides information and training in all Primary Care centres in Spain. The Faecal Incontinence Expert Patient Programme has been developed to ensure that everyone who wants it has high-quality sources within their reach, and that this allows them to understand, be interested in and plan, to the extent possible, their own destiny.

Despite all the progress mentioned, incontinence continues to be a problem that many patients hide, either because they have normalised it, or, quite the opposite, because of the social alienation that it can entail. Unfortunately, many patients come to consider a dramatic end to avoid continuing to suffer the physical, mental, social and personal consequences that can arise from this condition.[14] Precisely to try to eradicate this type of situation, ASIA is working on a new collaborative project (AECP, SCOG, SERMEF, SEECIR, COPIB), the Faecal Incontinence Expert Patient Programme, whose primary objective is to provide sources of high quality information, adapted for patients. This helps them to understand, be interested in and plan their own destiny to the extent possible, giving them the ability to make informed decisions about their health.

Finally, ASIA advocates for legal and political changes that improve the quality of life of people with faecal incontinence, promoting inclusion and accessibility policies.

In short, a good position has been achieved, with solid networks created at the grassroots for patients and at the level of health professionals specialised in this subject. Having these two powerful tools, it is advisable to plan properly and decide where to direct the most immediate efforts. Probably, the two great challenges that remain on the horizon are general health education and continuity of care.

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Ethics approval

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Additional remark

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