

Patient Information on Anorectal Manometry

What is an Anorectal manometry (ARM) Diagnostic Test?

Anorectal manometry is a diagnostic test performed to evaluate patients with constipation, fecal incontinence or other disorders that involve the anorectal sphincter (the muscle in the anus). This test measures the pressures of the anal sphincter muscles, the sensation in the rectum, and the neural reflexes that are needed for normal bowel movements.

Why would a Person need ARM?

Anorectal manometry is done in with difficult to treat constipation, fecal incontinence (unable to stop stool from leaking), and abnormalities of the anus (anal malformations).

What can be learned from ARM?

The anal and rectal area contains specialized muscles that regulate stooling. Normally, when stool enters the rectum, the anal sphincter muscle tightens to prevent passage of stool at an inconvenient time. If this muscle is weak or does not contract in a timely way, incontinence (leakage of stool) may occur. Normally, when a person pushes or bears down to have a bowel movement, the anal sphincter muscles relax, so stool can pass. An ARM test is able to measure this and can identify if the muscles tighten instead of relaxing, this will prevent stool from coming out, this problem is called Dyssynergic Defecation. This test is also used to assess if you have a normal sensation and are using your muscles correctly to hold and pass stool. It can help to diagnose a condition called anal stenosis, dilation of the rectum and lack of coordination of the muscles controlling the anus. Among many other indications a key marker is to examine that there is no neurological dysfunction causing Chronic Constipation as well. Making a diagnosis of one of these conditions will help your doctor to determine management options for you with less ambiguity and faster results. These options may include changes in diet, medications, physical therapy, or surgery. Physical therapy may be helpful to retrain your muscles to work correctly and can also help you to sense when you need to have a bowel movement to avoid accidents.

How do we prepare for the procedure?

Patients age 9 and up: Give one Adult Fleet® enema 2 hours prior to your study.

You can purchase the Fleet® enemas from a pharmacy or supermarket. This procedure does not involve sedation, so you may eat and take your normal medications up until the procedure.

How is ARM performed?

The test takes approximately 15-20 minutes. You will be asked to change into a hospital gown or robe from the waist down and then to lie on your left side. A small, flexible tube, about the size of a thermometer, with a balloon at the end is inserted into the rectum. The catheter is connected to a computer that measures the pressure of the anal muscles. You will be asked a series of questions and objectives to squeeze, relax and push the catheter at various times while the anal sphincter muscle pressures are measured. During the test, the small balloon attached to the catheter may be inflated in the rectum to assess the normal reflex pathways. Finally, you will be asked to try to expel the catheter by trying to have a bowel movement.

What happens after the procedure?

After the examination, you may resume normal activities and a regular diet.

What are the risks of ARM?

Anorectal manometry is a safe, low risk procedure and is unlikely to cause any pain. Complications are rare and can include anal pain, perforation (tearing) of the rectum, bleeding of the rectum and equipment failure.

What should we watch for after the procedure?

For most people, they will experience no complications from the procedure. A very few may develop a little tenderness or have a small amount of bleeding with having a bowel movement. Please contact our office if you have any concerns following the procedure. Call for passage of more than 1 tsp of blood, fever or sharp abdominal pain.

Photo of anorectal Manometry Device

