

Botox® injection for Overactive Bladder

Information for patients

This information leaflet has been developed for patients to help your understanding of having Botox® (proprietary name for Onabotulinum toxin A) injection into your bladder for overactive bladder (OAB). It is intended to be a guide and is not expected to cover every possible detail. If you have any other questions or concerns please speak to the doctor or nurse specialist, who will be happy to discuss them with you.

What is the purpose of treatment?

The purpose of this treatment is to treat symptoms of overactive bladder that has failed to respond to other medical treatment.

Why am I being offered this treatment?

You have an overactive bladder (symptoms of urinary urgency, frequency and urge incontinence) and you have not found an improvement in your symptoms with the treatment so far.

What are the possible benefits of the treatment?

The effect of treatment can take up to 10 days to become apparent, so whilst some patients may notice immediate relief of their symptoms others may not. It is not known how long the improvement might last, however previous studies have shown the effects of the treatment last, on average, 6-9 months.

If you receive repeated injections, we hope to re-inject them on a yearly basis, but will inject sooner if the symptoms recur and the test you must evaluate your bladder function is similar to those before any injections.

Treatment side-effects

Botox® (Onabotulinum toxin A) is a neurotoxin, which has been safely used for the past 20 years to control various muscular disorders of neurological origin. You will always be given an opportunity to discuss the side effects. The reported side effects include:

Common (1 person in 10)

- Blood in the urine
- Discomfort in the bladder
- Urinary tract infection (8%)
- Difficulty in emptying the bladder,
- Requiring the use of intermittent self- catheterisation (ISC) (30%)

Occasional (1 person in 10 to 50)

- Failure to pass urine at all, requiring insertion of a catheter or ISC.

Rare (less than 1 person in 50)

- Allergic reaction

- Generalised weakness because of the toxin on the muscles of the body.
- Severe skin rash – Erythema multiforme

What will happen to me if I decide to have the injections?

The treatment will be performed 3 stages:

1. Outpatient clinic visit
2. Treatment
3. Post-treatment follow-up.

Outpatient clinic visit

This visit is to assess if it is appropriate to offer you this treatment. You will have tests to assess your bladder function (urodynamic assessment) if this has not been done before.

Once you have decided to proceed with this treatment, you will need to sign a consent form. You will also be asked to complete a health questionnaire.

Botox® (Onabotulinum toxin A) temporarily reduces the ability of the bladder to contract and empty bladder (urinary retention) (20% to 70% of patients). You must be willing to carry out intermittent self-catheterisation to empty the bladder and this will be taught to you prior to the procedure.

Treatment

If the treatment is suitable for you and you decide to have the injections, you will be given an appointment to attend the hospital for the injection to be given inside your bladder under local anaesthetic unless you have requested sedation or a general anaesthetic in which case you will need to attend a pre-operative visit to see the nurse to have tests done prior to the anaesthetic. This treatment will be performed in the Day Surgery Unit.

Once you have been admitted to the unit you will be asked to provide a fresh urine sample, so that it may be tested for infection. If this test does not show any trace of urinary infection, you will then proceed to having the injections.

The procedure

The injections will be carried out normally under local anaesthetic. This procedure can also be performed under sedation or general anaesthesia if you feel you are unable to tolerate the discomfort that may occur when the procedure is undertaken under local anaesthetic.

An anaesthetic gel will be applied to the urethra and a special telescope (cystoscope) is passed into the bladder. The bladder will then be injected with Botox® (Onabotulinum toxin A) at 20 to 30 areas in the bladder. The whole procedure will last about 20 minutes.

You will be able to go home on the same day, provided you have passed urine and feel comfortable. You will receive a short course (3 doses) of antibiotics as protection against infection. It is common for your urine to be

slightly blood stained and experience minimal discomfort while passing urine after this procedure and this will normally settle within 48 hours.

Cautions

You must not have Botox® (Onabotulinum toxin A) injections into the bladder if you are pregnant or may become pregnant whilst the effects of the drug may be present.

Post-treatment follow-up

Two weeks after the injections you will be seen your consultant to check on your progress with the treatment and deal with any issues that may arise as a result of you having had Botox® (Onabotulinum toxin A) injections into the bladder.

You will be asked to empty your bladder whilst in the department and an ultrasound scan of your bladder will be performed to check if you are emptying completely. If you are not emptying completely one of the specialist nurses will remind you about how to carry out ISC.

There will be further follow-up visits at 12 weeks and 6 months after treatment. You must inform us when you feel the treatment is wearing off.

What are the alternatives for treatment?

Major surgery such as bladder augmentation (to increase bladder capacity) and sacral nerve modulation are procedures that are not offered at this hospital and you will need to be referred to a centre that does offer this.

What if I have problems after discharge?

If you need assistance during out of the hours, please contact Emergency GP or attend to a nearby A&E. Or contact Shirley Oaks Hospital 0208 655 5500.

You may contact Shirley Oaks Hospital:

By Telephone: 020 8655 5500 is our direct line or

By post: Shirley Oaks Hospital, Poppy Lane, Shirley Oaks Village, Croydon CR9 8AB

Your questions and comments:

If you have a problem when in hospital that the nurses and doctors are unable to resolve, contact the Director of Clinical Services at Shirley Oaks Hospital.

Smoking:

Shirley Oaks Hospital is a no smoking hospital.

Data Protection:

During your visit you will be asked for some personal details. This is kept confidential and used to plan your care. It will only be used by staff who need to see it because they are involved in your care and we may send details to your GP.