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VALIDATED OUTCOME AND URODYNAMIC MEASURES FOR THE TREATMENT OF DO WITH INTRAVESICAL INJECTIONS OF BOTULINUM TOXIN A.

Introduction

Intravesical injection of Botulinum Toxin A has been approved by NICE (October 2006) as second line treatment of Detrusor Overactivity (DO). Since its introduction by Schurch in 2000, such therapy is now well established.

We aimed to predict the outcome from urodynamic parameters and assess response using a validated symptom score.

Methods

Over a 4 year period, data was collected on patients receiving intradetrusor injections of boltulinum toxin A for DO. Preoperative urodynamics was recorded as were pre- and post-procedure symptoms utilising the validated International Consultation Incontinence questionnaires (ICIQ) for OAB and urge incontinence (UI). Follow up was for at least 3 months.

Results

Data was collected on 71 patients (56 female, mean age 55 years). Sixty-two percent were performed under LA. All patients had a urodynamic diagnosis of DO, either alone or with stress incontinence (USI).

The mean pre and post op residual volumes were 57mls and 173 mls respectively. In terms of pre-operative urodynamic findings, subjective improvement was associated with a higher incidence of neurogenic DO (30% vs 7% in those with no benefit) and a lower rate of USI (13% vs 21%). There was also a trend for a lower maximum DO amplitude and improvement (mean $44\text{cmH}_2\text{O}$ vs 73cm H₂O).

The mean pre and post operative ICIQ-OAB scores were 44 and 31 respectively whilst for the ICIQ-UI, these values were 16 and 11 respectively. This represents an improvement in symptom scoring of at least 30%.

Discussion

Our data shows that significant short term benefit is achieved with the use of Botulinum Toxin A for the treatment of DO as assessed by validated symptom scoring. Response may also be predicted by urodynamic parameters. These objective assessments may provide further information to aid patient counselling and informed consent.

Specify source of funding or grant	NONE
Is this a clinical trial?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	No
This study did not require ethics committee approval because	RETROSPECTIVE CLINICAL AUDIT OF PRACTICE
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes