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## **BOTULINUM TOXIN IN OAB: A CASE SERIES.**

### Hypothesis / aims of study

This study aims to outline the effectiveness of botulinum toxin (500 IU) in the management of overactive bladder syndrome. It outlines therapeutic outcome in the form of subjective clinical comments coupled with objective ICIQ-SF scoring. It provides a view of both intra-operative and post-operative complication rates. A follow-up time of a minimum of 2 years allows an estimation of treatment success and duration of effect.

### Study design, materials and methods

A retrospective chart review of female patients with intractable OAB managed by the specialist urogynaecology service at a district general hospital was carried out. All cases treated with bladder injections of botulinum toxin were recorded. 52 patients' clinical notes were reviewed. 5 patients were excluded for dosage changes and 4 patients for diagnostic inaccuracies. 43 patients were finally included in the study. Clinical data was recorded including parity, BMI, co-morbidities, previous gynaecological problems, and medication history. Urodynamics results were obtained and reviewed. Botulinum treatment regimes were reviewed in detail and each episode was evaluated for cystoscopic findings, subjective and objective success, complications and duration of effect.

### Results

The average patient age was 60 years. Mean parity was 2.31. Around 15% of patients were smokers and had a mean BMI of 30. Around 50% of cases had previous gynaecological surgery and 60% of cases had tried anti-muscarinic treatment. A normal cystoscopy was noted in over 80% of cases. A subjective patient satisfaction rate of 78% was recorded. 80% of ICIQ-SF scores improved by a minimum of 6 points. There were no intra-operative complications within this study. Post-operative urinary tract infection rate was recorded at around 5%. Long-term voiding dysfunction occurred in less than 4% of cases.

### Interpretation of results

A high subjective and objective success rate coupled with minimal complications make this treatment safe and effective in the hands of the skilled subspecialist urogynaecologist.

### Concluding message

This study will hopefully provide the ICS delegates reliable data on the use of botulinum toxin in the management of intractable OAB. The fact the procedures were carried out by a single clinician and the relatively long follow-up period adds significant weight to its significance.

<b><i>Specify source of funding or grant</i></b>	<b>Nil.</b>
<b><i>Is this a clinical trial?</i></b>	<b>No</b>
<b><i>What were the subjects in the study?</i></b>	<b>HUMAN</b>
<b><i>Was this study approved by an ethics committee?</i></b>	<b>No</b>
<b><i>This study did not require ethics committee approval because</i></b>	<b>It is a retrospective case review. There was no trial of clinical treatment.</b>
<b><i>Was the Declaration of Helsinki followed?</i></b>	<b>Yes</b>
<b><i>Was informed consent obtained from the patients?</i></b>	<b>No</b>