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1. Urology

## THE ADJUVANT BOTOX THERAPY FOR BENIGN PROSTATE SYNDROME

### Hypothesis / aims of study

In addition to obstructive micturation irritative symptoms characterize the common complaints of patients suffering from benign prostate syndrome. Often the urge to urinate and OAB (overactive bladder) persist after operative therapy on the obstructive prostate. The proven beneficial effects of Botulinumtoxin A (BTX-A) for the therapy of idiopathic as well as neurogenic OAB raise the possibility of implementing an adjuvant application in combination with a transurethral prostate intervention

### Study design, materials and methods

We treated in total 36 patients with an average age of 71 years (59-82) with Botulinumtoxin-A (Botox Allergan) in addition to their regular therapy consisting of a photo-selective laser vaporization of the prostate (PVP). The applied BTX dosage of 200IE was administered via 20 injection sites. We evaluated stationary treatments and post-stationary development via Uroflow metrics, post residual volume as well as standardized questionnaires concerning international prostate symptoms scores, International Inventory of erectile function and International Consultation and Incontinence Questionnaire (IPSS, IIEF and ICIQ). The post evaluation was carried out on the basis of patient records and telephone interviews

### Results

All the interventions were completed without complications. The inwelling catheter was removed 48 hours after the procedure. The in-patient spends on average 2 days (1-5). The uroflow metrics showed an increase of free-flow strength of 90% from 10 (3-15) ml/s to 19 (9-32) ml/s on average. The post residual volume decreased by 44% from 71 (0-237) ml to 40 (0-80)ml on average. In one case a post operative urinary retention occurred, but this was attributable to a residual adenoma. The follow-up displayed a significant reduction of the daily urinary frequency (micturation frequency) of 61 % (13x vs. 5x), as well as a reduction of nocturnal urinary frequency of 75 % (4x vs. 1x). OAB symptomatic episodes of incontinence were no longer present after the treatment (PADS 1x vs.0x). The IPSS score was reduced by 81% from an average of 21 (+/- ) points to 4 (+/- ) points. The quality of life was increased by 55% from 9(+/- ) to 4 (+/- ) points. Systemic side-effects of the toxin injection were not present

### Concluding message

The adjuvant Botox therapy appears to be effective in terms of both the functional and the subjective parameters. This combination therapy has proved itself an effective and low risk application for this special indication

### Disclosures

**Funding:** No **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics not Req'd:** retrospective study **Helsinki:** Yes **Informed Consent:** Yes