

## INTERMITTENT SELF CATHETERISATION FOR URINARY RETENTION POST-INTRAVESICAL BOTULINUM TOXIN A INJECTIONS: PATIENT ATTITUDES AND PREFERENCES

### Hypothesis / aims of study

Intravesical injections of botulinum toxin A for idiopathic detrusor overactivity can result in incomplete emptying and retention of urine in approximately 15% of patients. Pre-operatively, all our patients are counselled regarding these complications and the possibility of intermittent self catheterisation which is included in their information booklet. Even though not routinely offered, self catheterisation is demonstrated to some patients. We aimed to evaluate patients' opinions and preferences regarding the possibility of being trained to perform self catheterisation pre-operatively.

### Study design, materials and methods

A post-operative questionnaire was devised for patients undergoing intravesical botulinum toxin A injections. All patients who underwent botulinum toxin A injections for idiopathic detrusor overactivity in our unit in a period of 12 months were asked to complete the questionnaire. Information was thus obtained about pre-operative counselling and demonstration of self catheterisation along with patients' viewpoints concerning these issues. Additionally, patients performing self catheterisation were asked to score their satisfaction with it on a standard visual analogue scale. Data was divided into two groups, group A consisted of patients performing self catheterisation as a consequence of their therapy and group B of those who were not performing self catheterisation.

### Results

Out of 52 patients, 39 responded to the survey. Group A comprised of 10 patients and Group B included 29 patients. The results for both groups are summarized.

Patient responses	Group A	Group B
Were demonstrated self catheterisation pre-operatively?	Yes 6 (60%)	Yes 2 (6.89%)
	No 4 (40%)	No 27 (93.1%)
Would prefer pre-operative self catheterisation training?	Yes 3 (30%)	Yes 4 (13.79%)
	No 3 (30%)	No 12 (41.37%)
	No preference 4 (40%)	No preference 13 (44.82%)
Would refuse botox if shown how to perform self catheterisation?	Yes 0	Yes 1 (3.44%)
	No 9 (90%)	No 15 (51.72%)
	Don't know 1 (10%)	Don't know 13 (44.82%)

In terms of patients' overall satisfaction with self catheterisation, the scores were in the range of 3 to 7 out of 10.

### Interpretation of results

Preference for pre-operative self catheterisation training is higher in those performing it post-operatively. No patient performing self catheterisation as a result of botulinum toxin A injections would have declined injections if they were taught beforehand.

### Concluding message

We recommend that all patients should be offered intermittent self catheterisation tuition prior to undergoing botulinum toxin A injections. It would be interesting to assess whether satisfaction with self catheterisation improves in those who receive pre-operative tuition.

<b>Specify source of funding or grant</b>	None
<b>Is this a clinical trial?</b>	No
<b>What were the subjects in the study?</b>	HUMAN
<b>Was this study approved by an ethics committee?</b>	No
<b>This study did not require ethics committee approval because</b>	Questionnaire based study
<b>Was the Declaration of Helsinki followed?</b>	No
<b>This study did not follow the Declaration of Helsinki in the sense that</b>	Not required

---

*Was informed consent obtained from the patients?*

Yes

---