VIDEO URODYNAMIC STUDIES & MULTIDISCIPLINARY REVIEW IMPROVES THE BLADDER MANAGEMENT OF SPINAL CORD INJURED PATIENTS.

Hypothesis / aims of study
Regular videourodynamic (VUD) assessment of spinal cord injured (SCI) patients is currently a topic of debate, with no consensus in the frequency and timing of studies, and how the results should be reviewed. We report our experience of videourodynamic assessment followed by a review in our neurourology by a multidisciplinary team (MDT) meeting in optimising urological management of the SCI population.

Study design, materials and methods
This retrospective audit reviewed the results of VUD studies and subsequent neurourology MDT discussions of 100 consecutive SCI patients in order to determine the impact of results on subsequent treatment. The main outcomes measures included need for urological intervention, non-urological intervention. Data was collected retrospectively over an 8 month period.

Results
From the 100 patients 68 patients required changes to optimise bladder management. Of this 68 patients; 30 (44%) patients underwent a surgical procedure, 16 (24%) had a change to their current catheter care, and 15 (22%) had a pharmacological agent added to their care. Seven patients underwent a combination of surgical intervention and medication change. In the group that did not have an intervention based upon the MDT discussion 6 required out-patients appointments to discuss other aspects of bladder care including management of recurrent urinary tract infection.

Interpretation of results
Regular assessment of the urinary tract with VUD is an important aspect of care in the SCI population. The presence of an indwelling catheter or lack of urinary symptoms does not preclude the presence of high bladder pressures with resultant upper urinary tract dysfunction. Furthermore, VUD studies allow treatment failures to be detected and facilitate the planning of further intervention.

Concluding message
Regular VUD assessments play an essential role in bladder management of patients with SCI’s. Having a regular neurourology MDT meeting to review the results of these studies allows efficient changes in bladder management to be implemented.

Disclosures
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