THE ROLE OF PERCUTANEOUS POSTERIOR TIBIAL NERVE STIMULATION (PTNS) EITHER ALONE OR COMBINED WITH AN ANTICHOLINERGIC AGENT IN TREATMENT OF PATIENTS WITH OVERACTIVE BLADDER

Hypothesis / aims of study
To evaluate the efficacy of percutaneous tibial nerve stimulation (PTNS), either alone or combined with an anticholinergic agent, in the treatment of patients with overactive bladder (OAB) in whom previous conservative treatment failed.

Study design, materials and methods
A total of 30 patients with OAB in whom all conventional therapies failed were included into the study between January 2010 and April 2011. Patients were randomly divided into 3 groups. Group 1: PTNS group, Group 2: patients receiving an anticholinergic agent, Group 3: Patients receiving both PTNS and anticholinergic agent (ACA). PTNS was applied as previously described, and treatment continued for 12 weeks with each session lasting 30 minutes.

Results
All parameters of the bladder diary improved significantly in all groups (p<0.05). Similarly, all scores measured by questionnaires of Urinary Distress Inventory (UDI-6), Incontinence Impact Questionnaire (IIQ-7) and Over Active Bladder symptom scores (OABSS) showed significant improvements in all groups. When the improvements in symptoms were compared among the groups, there was a statistically significantly higher improvement in PTNS and PTNS + ACA groups when compared to group 2.

Interpretation of results
PTNS was found to be more effective than anticholinergics in the treatment of resistant OAB cases.

Concluding message
PTNS is a safe, simple and minimally invasive treatment modality in patients with OAB, and it may be suggested either alone or in combination with anticholinergics when conventional treatments fail.

Disclosures
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