465

Marcelissen T¹, Rahnama'i S², Brierly B³, de Vries P² **1.** Maastricht University Medical Centre, **2.** Zuyderland Medical Centre, Heerlen, **3.** Maastricht University

LONG-TERM FOLLOW-UP OF PATIENTS WHO FAILED INTRAVESICAL BOTULINUM TOXIN A INJECTIONS

Hypothesis / aims of study

Botulinum toxin A (BoNT-A) is increasingly used as a treatment for idiopathic overactive bladder (OAB) symptoms. Due to the temporary effect of botulinum toxin on the bladder, repeated injections are needed. Although initial results of BoNT-A for OAB are promising, a significant number of patients discontinue treatment during follow-up for various reasons. Although much research has been done on the effectiveness of this treatment, there is still little known about the follow-up of patients who discontinue BoNT-A. This study is the first to address this important topic.

Study design, materials and methods

All patients who were treated with BoNT-A between 2004 and 2010 were invited to join a written survey in June, 2015. Only women with idiopathic, nonneurogenic OAB symptoms (both wet and dry) were included. The survey was designed for two purposes: to assess current urinary symptoms in patients who failed BoNT-A, and to evaluate their experiences with BoNT-A and consequent treatments. Urinary symptoms were evaluated with the validated Dutch version of the International Consultation on Incontinence Questionnaire (ICIQ). Patient experiences with BoNT-A were evaluated with a nonvalidated questionnaire, which addressed the reasons for discontinuation, adverse events, consecutive treatments and use of anticholinergic medication.

Results

In total, 74 patients were identified who discontinued BTX-A treatment. Of the 74 questionnaires sent, 46 were returned (response rate of 62%). All patients underwent at least one treatment with BTX-A, 28% had two treatments, and 20% had three or more treatments. In general, patients rated the burden (e.g. pain, fear) of the treatment as low (average score 3.2 out of a scale of 10). The most common reasons for discontinuation of treatment were insufficient effect (37%), the need for clean intermittent self-catheterization (CIC) (13%) and urinary tract infections (UTI) (9%). Seventeen percent of the patients reported that they did not want a new treatment despite good effect.

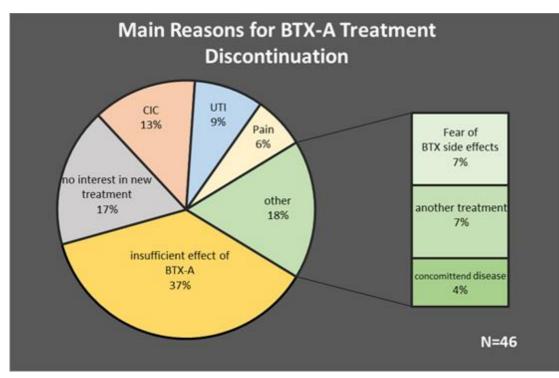
After an average follow-up of 92 months, more than three-quarters (76%) of the patients suffered from incontinence. In most patients, incontinence had a great influence on daily life (average score 7 on a scale of 10). During the time of this survey, 25% of the patients used drugs for their OAB symptoms, 15% was referred for sacral neuromodulation and 1 patient underwent a urinary deviation.

Interpretation of results

The majority of patients who failed BoNT-A treatment in our study experience debilitating urinary symptoms after long-term followup. Besides insufficient effect, the most common reasons for discontinuing BoNT-A were the need for CIC, recurrent UTI and pain. Surprisingly, 17% of patients requested no repeated BoNT-A injections despite previous satisfactory results.

Concluding message

Our study provides important information on the follow-up and the reasons for discontinuation in patients with idiopathic OAB. This information can be used in patients counseling and further improvement of BoNT-A treatment.



<u>Disclosures</u> Funding: None Clinical Trial: No Subjects: HUMAN Ethics Committee: METC Zuyderland, Heerlen Helsinki: Yes Informed Consent: No