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ISSUES IN SACRAL NEUROMODULATION AMONGST TURKISH UROLOGISTS.

Hypothesis / aims of study

To determine issues in sacral neuromodulation (SNM) treatment amongst Turkish urologists.

Study design, materials and methods

310 urologists working in Turkey were asked to fill in a questionnaire concerning their daily SNM practice. The questionnaires were distributed at four local meetings and at one national meeting of female and functional urology.

Results

49 urologists answered the questionnaire. The total response rate was 15.8%. 44.8% of respondents were from university hospitals, 22.4% were from teaching hospital, and 16.3% were from general hospitals. 41/49 respondents (83.7%) were not performing SNM due to lack in training (36/41, 87.8%), low patient number (16/41, 39%), high cost (7/41, 17%), and working in a non-authoritative hospital to perform SNM (5/41, 12.1%). 30/41 respondents (71.3%) reported that if they were trained they would perform SNM. Overall, 8/49 respondents were performing SNM (16.3%). 5/8 of them (62.5%) were performing SNM for refractory overactive bladder (OAB), 4/8 (50%) for chronic urinary retention, and 4/8 (50%) for painful bladder pain syndrome. 8/8 of the respondents were performing 1-2 SNM in a month and all in operating room. During phase I, 3/8 of respondents were searching for motor responses, while 5/8 of respondents were searching both motor and sensory responses.

Interpretation of results

Turkish urologists are not commonly performing sacral neuromodulation, mainly due to lack in training.

Concluding message

Educational courses seem to be helpful to increase the number of sacral neuromodulation treatment amongst Turkish urologists.

Disclosures

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