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Hamid R¹, Pakzad M¹, Shah J¹, Ockrim J¹, Greenwell T¹

1. University College London Hospitals

THE EFFICACY OF SACRAL NEUROMODULATION FOR TREATMENT OF MALE VOIDING DYSFUNCTION

Hypothesis / aims of study

Sacral neuromodulation (SNM) is an established treatment for controlling overactive bladder symptoms especially in females. It's role in lames is not well defined. We reviewed our experience with this technique in this group

Study design, materials and methods

We reviewed our prospectively collected database to identify male patients with voiding dysfunction undergoing trial of SNM over the last 18 months. All presented with voiding dysfunction with some in retention requiring self intermittent catheterization (SIC). All underwent video-urodynamic studies (VCMG). A neurological cause was excluded with clinical examination and cross sectional imaging.

Results

We identified 16 patients. The mean age was 44 years. Eight patients were performing SIC. One had a suprapubic catheter and 7 voiding with straining. VCMG revealed no detrusor overactivity in any with 10 demonstrating acontractile detrusor and 6 high pressure low flow system consistent with high tone non relaxing sphincter (HTNRS) on the accompanying video clip. All underwent a trial of tined lead for a minimum of 4 weeks. There was no significant benefit in 12/16 and the tined lead was removed. A successful outcome was demonstrated in 4/16 (25%) and permanent pulse generator was implanted. It stopped working after few months in 1 patient. One needed to be explanted due to infection. Currently, 2/16 patients have a working implant.

Interpretation of results

It appears SNM is not an optimal therapy for treatment of non-neurogenic voiding dysfunction in male patients. We feel further work is required to identify specific-select patients with a larger cohort to evaluate its role in this particular condition.

Concluding message

SNM is not an optimal therapy for treatment of non-neurogenic voiding dysfunction in male patients

Disclosures

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