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TRANSURETHRAL INJECTION OF BOTULINUM A TOXIN INTO THE URETHRAL SPHINCTER IN PATIENTS WITH BLADDER OUTLET OBSTRUCTION

Aims of Study

Botulinum A toxin (BTX A) injection into the external urinary sphincter has been reported in men with detrusor-sphincter dyssynergia. BTX A has been used in this study to evaluate its efficacy and safety when injected into the external sphincter.

Methods

Six patients (4 males and 2 females) with variable etiologies of bladder outlet obstruction. BTX A was injected into the external sphincter at the 4, 8, and 12 O'clock positions. The patients were followed clinically and underwent urodynamic study including pressure-flow and urethral pressure profile pre-and post-operatively.

Results

A mean of 311 units of BTX A (Botox), ranging between 100 and 400 units were injected into the external sphincter. Mean number of injections was 2.3 (1 to 3 injections). No adverse effects were observed during or after the injection. All patients were able to void without catheterisation post-operatively. All patients reported subjective improvement of bladder emptying. Urodynamic study revealed improved maximum detrusor pressure, post-voiding residual, and urethral closure pressure. Follow up ranged between 3 and 9 months (mean of 6 months). BTX A effects lasted for 2 to 6 months only, making re-injection necessary.

Conclusions

Although costly, BTX A injection is a safe, effective, and a valid alternative for both male and female patients with variable causes of complex voiding dysfunction leading to bladder outlet obstruction. Still, repeated injections are required and represent the main drawback of such treatment.