Vaze A¹, Hijaz A¹, Rackley R¹, Daneshgari F¹, Goldman H ¹, Abdelmalak J¹, Vasavada S¹ 1. THE CLEVELAND CLINIC FOUNDATION

SACRAL NEUROMODULATION THERAPY FOR THE MANAGEMENT OF NEUROGENIC VOIDING DISORDERS

Hypothesis / aims of study

The role of sacral neuromodulation therapy (SNT) in the management of idiopathic refractory overactive bladder (OAB) and/or urinary retention (Ret) is well established. The aim of this study is to answer the research question of whether the concomitant presence of neurological conditions affects outcomes.

Study design, materials and methods

We identified patients who had undergone SNT for neurogenic bladder conditions (OAB/ Ret) at our institution from July 2002 till July 2004. The records of these patients were retrospectively reviewed for demographic characteristics, medical history, operative intervention, clinical response, and peri/postoperative complications. Clinical success was defined as progression to stage 2 implant based on the 50% improvement in symptomatology. Descriptive statistics are provided.

Results

43 patients with neurogenic bladder conditions were identified. There mean age was 51±14.7 years. 80% were females. The indication for SNT was retention in 8 and OAB in 35. The majority was patients with Multiple sclerosis (MS) (20/43=46.5%). The remaining neurological conditions included were lumbar disc disease (6), CVA (3), seizure (2), SAH (2), cauda equine syndrome (2), Gullian-Barré syndrome, benign tremor, Parkinsonism, cervical dystonia, lumbosacral neuritis, myelomeningocele, neurosarcoidosis, and spina bifida occulta. The overall success rate in progressing to a stage 2 implant was 67.4% (29/43). The rate was the same for retention (62.5%) and OAB (66.7%). The success rate for MS patients was 70%, while it was 33.3% for patients with lumbar disc disease/surgery.

Interpretation of results

This study answers the research question of whether the concomitant presence of neurological conditions affects outcomes. These results give us a clear indication of the relationship of neurogenic over active bladder, Multiple Sclerosis and the other neurogenic conditions.

Concluding message

The overall success for neurogenic OAB and retention was equal. MS patients had an equivalent success rate. The presence of lumbosacral disc disease/ surgery affected the outcome negatively. These findings warrant further evaluation in a larger population.