

UP TO DATE TREATMENT RESULTS OF DRUG REFRACTORIAL NON NEUROGENIC OVERACTIVE BLADDER WITH TRANSURETHRAL INTRAMURAL INTRAVESICAL INJECTION OF BOTULINUM TOXIN A

Hypothesis / aims of study

Incontinence is a dilemma for the patients and decreases the quality of life of the patient by a big extend and bans the patients from social activities.

The therapy of the drug refractorial non neurogenic overactive bladder is a real challenge for the urologist.

The treatment with injection of botulinum toxin A was performed in a patients group and was analyzed prospectively.

Study design, materials and methods

In the time range from january 2002 till december 2005, 122 patients (youngest : 34 years, eldest : 80 years) with non neurogenic overactivity bladder got injected endoscopically by botulinum toxin A (Dysport®: 300 Units) into the bladder wall.

The first 27 patients received a spinal anaesthesia, the other 95 patients were done in local anaesthesia (instillation of 20 ml 1% Xylocain in the bladder, residence time: 8 – 10 min).

The arrangement of the injections were located in the trigonum vesicae (3 injections, 1ml per injection = 30 U) and the dorsal wall of the bladder (7 injections, 1ml per injection = 30 U).

For securing the diagnosis, all the patients had an full urological examination (anamnesis with micturition diary, sonography, cystoscopy) and additionally got a video urodynamical examination before the treatment.

A control video urodynamical examination was performed 6 weeks after the treatment.

To exclude an painful bladder syndrome, a bilateral temporal sacral nerval block of the S3 nerval root was performed.

Results

109 patients showed a complete regress of the symptom for urgency and for incontinence with a recent increase of the voided volume.

The incontinence episodes were decreased from 12 times per day before the treatment to 2 times per day after the therapy.

The micturition frequency was reduced from 18 times per day to 7 times per day.

The voided volume got increased from 124 ml to 370 ml.

No of these 109 patients showed an increase of the residual urine.

13 patients showed temporarily a urinary retention which could be handled by intermittent catheterism.

For 27 patients, an injection repeat after 4 months had to be performed.

For 12 patients, an injection repeat after 6 months had to be performed.

8 patients needed an third injection because of another recidivation.

Serious side effects could not be found.

Interpretation of results

The minimal invasive application of botulinum toxin A and the high efficiency with no serious side effects, even in local anaesthesia possible, makes this therapy very interesting for the treatment of drug refractorial non neurogenic overactive bladder.

The treatment shows an significant success and makes it an very harmless and serious alternative in the therapy scheme of the drug refractorial non neurogenic overactive bladder.

Contrary to expectations most of the patients still have an effective voiding of their bladder.

Concluding message

Because of these premier experiences with the injection of botulinum toxin A (Dysport®) into the bladder wall, it could be said that this treatment option is a real alternative in the group of minimal invasive therapies of the drug refractorial non neurogenic overactive bladder.

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DISCLOSURES: NONE

HUMAN SUBJECTS: This study did not need ethical approval because off-label product use but followed the Declaration of Helsinki Informed consent was obtained from the patients.