Botox® treatment for an overactive bladder in women

Information for patients
Gynaecology
What is bladder overactivity (OAB)?

Bladder overactivity is a common condition, affecting around one in five people. Symptoms include urinary frequency, urgency (having to rush to the toilet) and urgency associated with leakage of urine (incontinence). An overactive bladder can result from nerve damage, but most of the time, no obvious reason can be found.

What is Botox® (Botulinum toxin)?

Botox® (Botulinum toxin type A) comes from a bacterium (Clostridium Botulinum). Botox® is a very strong chemical that stops the nerves (that make muscles contract) from working properly. It has been used in medicine for a number of years for conditions involving overactive muscles or muscles in spasm.

It has also been used in cosmetic surgery to paralyse the small muscles in the skin that cause wrinkles. It is very safe when used under careful medical control in small quantities.

Is Botox® licensed for use in the bladder?

Yes, Botox® is currently licensed to be used for the treatment of overactive bladder.

Before going ahead with this treatment, you need to be aware of the safety of the treatment and fully understand the possible benefits and side effects. Please ask your doctor or specialist nurse any questions you may have.

How does Botox® actually work?

In order to make a muscle contract, the nerve that supplies it usually releases a chemical (acetylcholine). Botox® works by preventing this chemical being released by the nerve.
If the right amount of Botox® is injected into a muscle, abnormal contractions or spasms can be reduced.

**What are the benefits of Botox®?**

When Botox® is injected into the bladder muscle (detrusor muscle), it can reduce the number of unwanted contractions and can therefore improve urinary frequency, urgency and incontinence in 75% to 80% of women.

**Are there any risks relating to Botox® treatment?**

Following Botox® treatment there is a risk that you will not be able to empty your bladder properly and you may not be able to pass urine at all. It is therefore important that all patients are taught how to empty their bladders with a catheter (self-catheterisation) before they have Botox® treatment.

A member of the nursing team will explain to you what self-catheterisation is, and teach and provide you with written information on how to perform self-catheterisation before you have Botox® treatment.

If you have nerve damage causing your overactive bladder, the risk of urinary retention after Botox® treatment is in the region of 90 - 100%.

If you have no known nerve damage, the risk of retention of urine and needing to use a catheter after Botox® treatment is approximately 20%.

If you have had previous surgery for urinary incontinence or have other medical problems, the risk of needing a catheter following this treatment may be greater.
Consent

As with any procedure we must seek your consent beforehand. The doctor will explain the risks, benefits and alternatives where relevant before they ask you for your written consent.

If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to ask for more information.

Do I need to take any special precautions on the day of treatment?

If your treatment is to be carried out under local anaesthetic (you are awake) you should eat, drink and take any tablets or medicines as you would normally.

If however you are having a general anaesthetic or sedation you will receive more information about how to prepare for your operation when you attend your pre-operative assessment clinic appointment.

What will happen at my pre-operative assessment appointment?

At the pre-operative assessment clinic the nurse will assess your state of health and will organise all the necessary tests. This may include blood tests, urine tests, an ECG (heart tracings) and x-rays.

Our aim is to start discharge planning at this appointment. We will ask you questions about your home situation. It is important for you to ask for any extra help that you feel you may need when you go home, so that plans can be set in place as soon as possible. This will help to avoid any unnecessary delays in you going home.
How is the treatment done?

The treatment is usually carried out using a flexible cystoscope (narrow flexible tube containing a miniature telescope).

The cystoscope is passed into your urethra (tube that carries urine from your bladder to the outside of your body) so the inside of your bladder can be seen and examined by the doctor.

A fine needle is then passed down the inside of the cystoscope and is used to inject the Botox® into your bladder muscle.

Once your bladder has been examined the Botox® is injected into approximately 20-40 different areas of the bladder.

Each injection contains a very small amount of Botox®.

Is Botox® treatment painful?

This treatment isn't usually painful but may be uncomfortable. You may feel some of the injections into the bladder but not others.

Most side effects with Botox® are short lived and mild.

What happens after I've had the treatment?

All patients are advised to stay in the department for at least an hour after their treatment. If you were able to pass urine without difficulty before Botox® treatment then you will be asked to pass urine and then have a bladder scan to check how well you are emptying your bladder before you go home.

You will be provided with a small supply of catheters and you may be advised to perform self-catheterisation for 2 - 3 days after your Botox® treatment to ensure that you are able to empty your bladder to completion.
Self-catherisation may have to continue for longer if your bladder needs time to adjust to the effects of the Botox® treatment.

If you already use catheters before the Botox® treatment you will need to continue doing so and may have to use them more often.

Once you have had the treatment, if you notice you have to pass urine more frequently, or have a burning sensation, or pain, when you pass urine, you may have a urine infection. It is important to contact your GP for further advice and provide a urine sample, in case you require antibiotic treatment.

**Can I drive after having treatment?**

It is not advisable to drive following Botox® treatment and it is advisable for you to travel home with a responsible adult who can stay with you overnight.

**How long should I take off work?**

It is advisable to take a few days off work, however you can return as soon as you feel fit to do so.

**Is there anything I should look out for when I go home?**

Some patients have complained of feeling generally unwell for a few days and others have reported flu-like symptoms or feeling tired and weak.

There are a few reports of more serious side effects including anaphylactic shock (a severe allergic reaction), severe muscle weakness, difficulty breathing and difficulty swallowing.

If you experience any of the above side effects, including difficulty breathing or swallowing, you must seek urgent medical assistance.
There is a risk of urinary tract infection (urine infection) following this treatment. All patients are given antibiotics at the time of treatment to help reduce this risk.

**How long will it take to work?**

Effects of the Botox® treatment are usually noted after 1-2 days. This time however is variable and it may be up to 2 weeks before you see the full effect of the Botox® treatment. Botox® treatment effect does vary from person to person and the effect may last anything from 6 - 9 months. Over time, the treatment effect will wear off and you will probably notice your original symptoms returning.

**How regularly should I be reviewed?**

You will have an outpatient appointment for a clinic review with the Urogynaecology specialist nurse 2-6 weeks following your Botox®. You will also be given an appointment for a telephone consultation 6 months after your Botox® and will be asked to complete an electronic questionnaire to advise future management.

If you experience any problems or your symptoms return before your next appointment, please contact your GP or the Urogynaecology Specialist Nurse.
Who should I contact if I have any concerns?

Gynaecology Outpatient Clinic and Urogynaecology Specialist Nurse

- **0114 226 8441**
  - Monday to Thursday: 9.00am - 5.00pm
  - Friday: 9.00am - 12.30pm

Out of normal working hours please ring Ward G2 (Gynaecology ward)

- **0114 226 8367**