



**PATIENT INFORMATION LEAFLET**

# **BOTULINUM TOXIN (BOTOX) FOR OVERACTIVE BLADDER**

## **WHAT IS BOTOX?**

The treatment is called Botulinum Toxin A. You may have heard of this drug under the brand name BOTOX®. Botox is a medicine that can be used to treat a variety of muscle disorders including overactive bladder (OAB).

## **WHY HAVE I BEEN OFFERED BOTOX TREATMENT?**

You have a condition called overactive bladder. OAB symptoms are caused by the bladder muscle squeezing to empty out urine inappropriately, even when the bladder is not full. This often happens without warning and when you do not want it to, for example, when hearing the sound of running water, or putting the key into the latch.

This means you may be experiencing some or all of the following:

- Passing urine more frequently than normal.
- Have a strong urge to pass urine that you cannot put off.
- Urinary leakage when you cannot get to the toilet quickly enough.
- Getting up to pass urine more than once through the night.

If other forms of treatment, for example, bladder retraining, diet and fluid advice or medication have not helped your bladder problem you may be offered Botox.

## **HOW DO THE BOTOX INJECTIONS WORK?**

The Botox is injected into the bladder and works by relaxing the muscle of the bladder wall (the detrusor muscle). This reduces urinary urgency and incontinence. Following the treatment, the effects last for several months after which the muscles return to their previous strength (usually 3-9 months but sometimes longer).

## **PLEASE READ THE NEXT SECTION CAREFULLY SO YOU CAN PREPARE FOR YOUR APPOINTMENT**

### **HOW DO I PREPARE FOR MY APPOINTMENT?**

It is important that you do not have a urinary tract infection as we will not be able to go ahead with the procedure if you have. If you are prone to urinary tract infections or have symptoms in the lead up to your appointment, please take a urine sample to your GP to be checked before your appointment. If you do have an infection, please contact us so we can re-arrange your appointment.

If you want, you can take some simple analgesia such as Paracetamol or Ibuprofen about 30 minutes - 1 hour before your appointment. You can eat and drink as normal before the treatment – in fact we would advise that you make sure you have eaten before attending.

You will be asked to provide a urine sample when you book in for your appointment, please ensure you have a comfortably full bladder on arrival.

### **WHAT DOES BOTOX TREATMENT INVOLVE?**

The procedure is quite simple and will be carried out under local anaesthetic in the outpatient department usually by a Clinical Nurse Specialist (CNS). On some occasions it will be done as a day case procedure under General Anaesthetic, but this will be discussed with you beforehand.

You will be in a clinic room with the Clinical Nurse Specialist doing the procedure and 2 other nurses assisting. The Clinical Nurse Specialist will explain the procedure to you and ask you to sign a consent form. You will be asked to undress from the waist down and will lie on a bed with your legs in supporting stirrups.

Some local anaesthetic gel will be introduced into your urethra (the tube through which urine leaves the body) and then a small telescope called a cystoscope will be passed along the urethra and into the bladder. The telescope is attached to a machine which displays the video on a screen so that your bladder wall can be visualised. You will be asked if you want to see the screen or not.

A very fine needle is then passed along the cystoscope and the Botox is injected into the bladder wall in several small injections around the bladder. Some patients do experience some mild discomfort with the injections, but it is usually tolerated well. The actual procedure takes around 10-15 minutes, but you will be in the clinic for around 40 minutes in total.

After the treatment, we will make sure that you are able to pass urine without any problems and check that you feel well enough to go home. If you need some time to recover, we have a recovery room where you can rest and be observed until you feel well enough to leave.

You will be given a one-off dose of an oral antibiotic tablet to prevent urinary tract infection and it is advised that you increase the amounts of fluids that you drink for 48 hours following the procedure.

## WHAT ARE THE RISKS OF BOTOX TREATMENT?

You may see some blood in your urine initially after the procedure and this is nothing to worry about. Significant bleeding is very rare. You may also experience a stinging sensation the few times you pass urine after the procedure.

There is a 1 in 12 risk of developing a urinary tract infection, but this can generally be treated easily with a course of antibiotics.

There is a 3-10% risk that you may need to self-catheterise temporarily to help empty your bladder following the procedure, but this will be discussed with you prior to the treatment.

Other very rare risks include allergic reaction including anaphylaxis, erythema multiforme (a severe skin rash), and generalized weakness.

You should consult your doctor if you experience any of the above problems.

## WHAT SHOULD I EXPECT FOLLOWING BOTOX TREATMENT?

Botulinum Toxin A does not work immediately. It can take anything from a few days up to 2 weeks before you begin to experience relief from your overactive bladder symptoms. You should find that you can hold more urine in your bladder and the sudden urges to urinate should decrease. There should be a reduction in urine leakage or stoppage of leakage altogether.

If you are taking medications by mouth to relax the bladder, you should be able to wean yourself off these once the Botox treatment begins to take effect. Your nurse will advise you about this.

Associated with this relief in symptoms, you may also notice that it becomes more difficult to empty your bladder. This is because Botox works by relaxing the muscle of the bladder, which can reduce its ability to contract and empty. If you are unable to empty your bladder completely, your nurse will teach you clean intermittent self-catheterisation (CISC). This involves passing a tiny tube into the bladder up to 3 to 4 times a day to empty it. This is a simple and safe procedure. Don't worry; once the effect of the Botox wears off, your bladder function should return.

Following your first treatment you will receive a telephone appointment after 3 weeks to assess how well the treatment has worked for you. After the initial telephone call, you will be asked to contact us when you start to feel the effects of the Botox wearing off so we can arrange a further appointment for repeat injections.

If you are experiencing any difficulty emptying your bladder or having any other issues before you receive your telephone follow up, please contact us on the numbers at the end of this leaflet.

## HOW LONG DO THE EFFECTS OF THE TREATMENT LAST?

The treatment effect commonly lasts for 6-9 months but may be slightly more or less than this. As the Botox wears off you may notice a gradual return in your symptoms. You may need to have repeated treatments to continue having relief of overactive bladder symptoms.

## HOW SUCCESSFUL IS BOTOX TREATMENT?

There is a 60-90% chance of achieving significant improvement in urinary urgency and urge leakage following Botox injections and a reduction in urinary frequency. Most people require repeat doses of Botox while others find significant long-term improvement after a single dose.

**If you require any further information or clarification, including clarification of terminology, please do not hesitate to talk to one of the doctors or nurses, who will be happy to discuss your concerns with you.**

## CONTACT DETAILS

**Warrell Unit Nurses:** (during office hours only)

(0161) 701 6150 or 701 6776



**For urgent out of hours enquiries:**

Emergency Gynaecology Unit (based at Wythenshawe Hospital – Ward F16)

(0161) 291 2561 (24 hours)



<https://mft.nhs.uk/saint-marys/services/gynaecology/urogynaecology/>