

Intravesical Botox Injections

urogynaecology patient
information

Overactive bladder, a common condition among women, is caused by involuntary contractions of the detrusor (bladder) muscle, which controls urine flow. This condition can have a significant social impact on your quality of life. When treated with Botox, normal bladder function is restored and this problem is relieved.

Botulinum toxin A, commonly known as Botox injections, best known in recent times for its role in the cosmetics industry, is now giving new hope to patients worldwide with urinary incontinence or painful urination safely and effectively and continue to show promise as a treatment for a variety of lower urinary tract dysfunctions.

What is involved?

This procedure is performed under a general anaesthetic as a day patient in hospital. Using a cystoscope - a small telescope, that is inserted through the urethra and into the bladder to achieve direct vision Botox will be injected into multiple sites in the bladder wall.

How does this work?

Botox acts by binding to the nerve endings of muscles, blocking the release of the chemical that causes the muscle to contract. When injected into specific areas, the muscle becomes paralysed or weakened, but leaves surrounding muscles unaffected, allowing for normal bladder function. In trials worldwide, there have been no reports to date of long-term complications such as stress urinary incontinence or urinary retention.

Results

A decrease or absence of bladder overactivity can be seen within 7 days of the injection. This can last up to 6 months after the first injection and reports of up to 12 months after subsequent injections.

Side Effects

Botox injections have been used for over 20 years for various conditions with no significant side effects.

You need to be aware that you may experience bladder pain for a number of days and this is due to the injection sites and will subside in up to 7 days.

After the Procedure

You may experience for up to 72 hours:

- Urinary frequency
- Dysuria – burning and stinging when you pass urine
- Haematuria (slight blood stained urine)

Use Ural™ sachets if required and if these symptoms persist notify your doctor.

You will be seen in clinic 10 to 12 weeks after surgery. Any problems or concerns during this time please contact the Urogynaecology Clinic and we will discuss these with you.

Tips for Success

Take Spirulina, 1 tablet twice a day, this can be purchased from a health food store, very good for overall bladder health.

Remember to empty your bladder efficiently; Sit comfortably on the toilet, feet flat on the floor and lean forward with your elbows on your knees.

Drink adequate fluids 6 – 8 glasses per day.

Contact your GP or Emergency Department if you experience any of the following:

- pain not relieved by painkillers
- burning or difficulty passing urine
- increased vaginal bleeding or passing clots
- smelly, offensive or unusual discharge
- fever or feeling unwell

Your doctor will be happy to discuss any concerns that you may have regarding this operation.

I have read this information leaflet and understand its contents.

Signed: _____

Name: _____

Date: _____

PLEASE BRING THIS DOCUMENT WITH YOU AT THE TIME OF ADMISSION FOR YOUR OPERATION