Botox® - in the treatment of an Over-Active Bladder (OAB)

Introduction
This leaflet will explain about Botox® treatment for an overactive bladder (OAB). OAB is where the bladder starts squeezing (contracting) inappropriately and without any warning during filling, causing the sudden urge to pass urine. This need to pass urine can be so strong that it can lead to a urine leakage. This may be caused by a problem with the nerves controlling the bladder - people with neurological disease are at risk of OAB - but very often no cause can be identified.

What is Botox®?
Botox® is purified toxin made from a bacterium. As such this is a toxic product used safely to control a variety of muscular disorders, such as muscular spasms. Botox® has been used to treat over-activity of the bladder wall muscle which causes urinary frequency (having to pass urine often during the day/and or at night) and an urgent desire to pass urine, sometimes associated with urine leakage (incontinence).

Who is suitable for the treatment of Botox®?
Patients where urodynamic studies that have shown they have an OAB. Before having Botox®, patients will have completed a trial of drugs designed to calm the bladder such as Oxybutynin, Tolterodine and Solifenacin.

How is Botox® given?
The procedure is usually carried out as a day case. You will have already been advised if you can eat or drink before the procedure takes place. No special preparations are necessary. You will be given some local anaesthetic which is put into the urethra (water pipe); this will numb the area. Small telescope (cystoscope) is inserted into the urethra to examine your bladder. Botox® is then injected into the bladder wall through a special needle passed through the telescope.
Usually 20 to 30 tiny injections are given into the muscle of the bladder. The procedure takes about 10 to 15 minutes. You should not feel any pain, although the injections can be a little uncomfortable.

What are the benefits?

Botox® produces a temporary paralysis of the injected muscle, improving and sometimes resolving the symptoms altogether. The effects are usually seen 4 to 5 days after the injection, and normally last around 6 to 9 months. Maximum benefit is usually felt about 2 weeks after the Botox® has been given. If your symptoms improve with Botox®, you may be offered further injections when the effects have worn off.

What are the side effects of Botox®?

- Blood may be seen in the urine after injections of Botox®. This blood usually appears a few days after the procedure and should disappear a few days later.
- A mild burning sensation on passing urine may happen. This could be a sign of a urine infection. If you still have the symptoms after 24 hours please contact your GP. They may prescribe antibiotics.
- Some patients experience difficulty in emptying their bladder. If this happens, you will be taught how to pass a tube into the bladder to drain the urine. You will also be shown how to remove the tube. This may be necessary 3 to 4 times a day until the effects of the Botox® wears off. Very rarely this can continue for a longer period.
- Headache, light headedness
- Abdominal pain and/or diarrhoea

It is important to understand that some medications may stop Botox® working, so it is vital that you let us know what medicines you are taking.

Common medicines that affect Botox® in this way are Nifedipine, Amlodipine, Verapamil, and Diltiazem.

It is not safe to have Botox® if you are:

- Pregnant
- Allergic to albumin (egg allergy)
Or if you suffer from:

- Myasthenia Gravis
- Lambert-Eaton Myasthenic Syndrome (LEMS)
- Amyotrophic Lateral Sclerosis

**What happens after treatment?**

You should be able to eat and drink as soon as you feel up to it. Once you have passed urine you can be discharged home. You will be advised to rest on the day of treatment, thereafter return to normal activities as you feel able. A follow up appointment will be arranged by your consultant.

**Seeking further help**

If you are having any difficulty in emptying your bladder or with incontinence after the Botox® treatment, please contact the Gloucestershire Continence Service for further advice.

**Contact information**

Gloucestershire Continence Service
Tel: 0300 422 5305
Monday to Friday, 9:00am to 5:00pm
E mail: ghn-tr.gloscontinenceservice@nhs.net

Content reviewed: March 2018