

**UROGYNAECOLOGY DEPARTMENT
UNIVERSITY HOSPITAL OF WALES**

BLADDER BOTOX INJECTIONS

Why is Botox used in bladder conditions?

- Administration of Botox injections is used in patients who have had a proven overactive bladder on urodynamic investigations.
- You will already have tried alternative treatments such as medications, bladder retraining and altering your drinking habits
- You must have tried these treatments before being considered for having Botox injected into your bladder.

What is Botox?

- Botulinum toxin Type A (Botox) has been used for several years for a variety of conditions, which are caused by muscle overactivity.
- Botox is licensed for injecting into the bladder, we use it for women who have tried but not responded to the other treatments mentioned above.

How does it work?

- Botox works by binding to the nerve endings of muscles, blocking the release of the chemical that causes the muscle to contract.
- It is injected into the bladder using a flexible cystoscope, usually with a local anaesthetic.

What are the risks and side effects?

- The use of Botox is very safe. However, rarely there can be minor side effects such as headache, light headedness and muscle weakness lasting for a week or two.
- Botox is sometimes so effective that it can be difficult to pass urine after having the injections. Around 20% of patients are unable to pass urine at all following this procedure. This does not happen immediately, it can take 6 weeks.
- Risk of urinary tract infection.
- If you have had Botox in any other part of the body in the last 4 months
- Please inform us if you are taking Anticoagulant medication e.g. warfarin or clexane, aspirin.

Requirements by Patient:

- You will need to be taught how to perform intermittent self catheterisation (ISC) with your nurse prior to having Botox injections.
- You will be required to complete questionnaires and a bladder chart before and 8 weeks after you botox treatment
- If your bladder does not empty fully after having Botox injections you may need to self catheterise until the Botox wears off or until your bladder is fully emptying again. This can take 6-12 months.
- If you have not been taught how to perform intermittent self catheterisation (ISC) you will **not** be able to have Botox injections
- You will be reviewed in outpatients 3 months after your treatment

How are Botox injections given?

- Botox injections are usually injected under a local anaesthetic in the outpatient department.
- Your Doctor will use a fine flexible telescope (cystoscope) to examine the inside of your bladder and urethra (water pipe) prior to administering the Botox injections.
- Please allow at least 1 hour for this appointment.
- Bring a sample of urine with you.

- **Please take analgesia 30 minutes prior to your bladder botox appointment**

Following your Botox injections:

- It is normal to see blood in your urine for up to 48 hours. It is important that you drink 1.5 -2 litres of fluid per day to assist with flushing your bladder until your urine becomes clear.
- You will be given a course of antibiotics to take following this procedure to reduce the risk of a possible urinary tract infection.
- If, however you have a combination of the following symptoms that persist, you may need to contact your GP and take a urine sample for testing: Pain on passing urine, cloudy, offensive smelling urine, you feel hot or shivery and have a temperature and the need to frequently pass urine.

How long will the Botox last?

- Your urinary symptoms may take up to 6 weeks to respond to your injections.
- The affects of the injections last for different lengths of time for different patients. For some patients the affects may only last a few months for others it may last up to a year.