

Department of Urogynaecology, Singleton Hospital, Swansea

Patient information leaflet

Botulinum toxin A bladder wall injection

Introduction:

Botulinum toxin A bladder wall injection is given to patients who suffer from overactive bladder that does not respond to medical treatment. Overactive bladder is a condition where the bladder muscle contracts without patients actually wanting to pass urine. As a result, patients get the feel they need to go to the toilet and may actually leak if they are not quick enough. As a result, they go to the toilet a lot and may reduce their activity for fear of leakage.

This leaflet explains what Botulinum toxin is, who may benefit from it, how injections are made and what patients can expect after injections.

What is Botulinum toxin A?

Botulinum toxin A is a chemical that relaxes muscles and is commonly used for wrinkles on the face. In the bladder, it can relax the bladder muscle, on the hope of reducing the need to go to the toilet.

Who may benefit from it?

Botulinum toxin A injections are given to patients who have tried medication for overactive bladder without much improvement. Medical treatment is tried first, so as to avoid having to perform surgery, but if it does not work then surgery is tried.

One of the possible side effects of Botulinum toxin A bladder wall injection is excessive relaxation of the bladder muscle, leading to retention of urine. Patients may need to pass a catheter to help emptying their bladder themselves. It is therefore important that patients are aware of this possibility and able to perform clean self catheterisation themselves, in case they have to do this after the injection.

How injections are given?

Injections are given using a telescope (camera) passed through the urethra (cystoscopy). This can be done under general or local anesthesia. This is usually as a day case and you will be able to go home on the same day.

What to expect after injections are given?

On the same day, you may notice that your urine has some blood in it. This is to be expected and should settle on its own within few days.

Before you go home, your ability to pass urine will be checked by an ultrasound estimation of the amount of urine retained in the bladder after passing urine. If the bladder is not emptying, then you will be shown how to empty it yourself, by passing a catheter.

Urinary tract infection may occur - you may feel discomfort on passing urine and it may smell. You should contact your doctor, who will take a specimen of urine and send it to the laboratory for confirmation of the presence of infection. Your doctor will also provide you with an antibiotic prescription.

Allergic reactions can happen, but they are extremely rare. These take the form of general malaise and possible rash. You will need to contact your doctor or the hospital for medication.

After going home, you will be asked to observe this and if you feel your bladder is holding back some of the urine, you can ring the continence adviser at Suite 17 via switchboard on 01792 205 666 to come for a bladder scan.

You can expect to see a reduction in the need to go to the toilet to pass water and urgency of having to do so within a couple of weeks from injection.

You will have a telephone follow up in 3-4 months time with Suite 17.

The effect of injection may wane with time and it may need to be repeated. On average, it lasts from 6 to 18 months.

Questions:

If you have any questions, you can ask the doctor or suite 17.