

Botulinum Toxin for Overactive Bladder

Why am I being offered this treatment?

You are being offered this treatment because you have an overactive bladder. People with overactive bladders have to rush to the toilet to pass water (urgency), and they have to pass water very often (frequency).

You will have already tried conservative treatments for overactive bladder. But, as you know, the tablets and bladder training sometimes don't work very well. We can offer treatment with botulinum toxin (Botox) when these treatments have not worked or only partially worked.

What is botulinum toxin?

The treatment is called botulinum toxin A. You may have heard of this drug under the brand name BOTOX®. It is used as a beauty treatment to get rid of wrinkles or to stop people sweating, but it can also treat muscle disorders, including cerebral palsy. Injections of this drug have successfully treated patients who develop bladder problems after spinal injury. The benefits for people with spinal injuries last between six and nine months. We are using this drug as a treatment for overactive bladder. The botulinum toxin is injected into the bladder wall muscle in several places. This will be performed in the Ambulatory Suite in Gynaecology Outpatients. You will be awake for the procedure, local anaesthetic will be used.

What are the benefits of this treatment?

The injection paralyses part of the bladder muscle which means that the bladder can no longer squeeze out urine as effectively. The bladder becomes more relaxed and stretchy meaning that you should be able to hold on longer before feeling the need to empty your bladder. This should help to reduce the episodes of urgency and urge incontinence (leakage).

How long does the treatment work for?

The effects of Botox usually start within seven days of the injection. The effect can last between 6 and 12 months; it cannot be reversed but will gradually wear off with time. Because the effects cannot be reversed, you should be certain you want the procedure to be done.

Most people with overactive bladders need repeated injections **every 6 months**. Botox has been used for at least 20-25 years for treatment of other muscle problems but has only been used in the last **15 to 20** years in the bladder. As it is a relatively new treatment, we do not yet know enough about the long-term effects of repeated treatments. **However, no major long-term effect has been reported to date.**

What tests will I need to see if I am suitable for the treatment?

We will give you a bladder diary to take home and fill in. We will ask you to write down how much bother your bladder is, how often you are passing urine, and how urgent it is. You will be seen by one of the doctors in the Urogynaecology team. They will check your medical history and make sure it is safe for you to have the injections. They will also check the results of the bladder test you had when you were told that you had an overactive bladder. You may need an ultrasound scan to make sure your bladder empties properly. This is the type of scan used on pregnant women. It takes about five minutes and is painless.

You will need to be taught how to use a urinary catheter before you have Botox in case you are unable to pass urine normally after receiving Botox. This will be taught by one of the specialist nurses and further details of this will be provided when you are assessed for Botox in clinic.

What happens next?

A very thin tube called a cystoscope, that has a camera on the end, is inserted into your bladder through the urethra (the tube you pass urine from). Gel is inserted into the urethra before the cystoscope is inserted. This enables us to see inside the bladder so we can check the bladder is healthy and inject the Botox safely into different sites in the bladder wall. There will be 9 injections; this may be increased if the dose of Botox is increased. After the treatment, you will be escorted into the recovery lounge, where there are toilet facilities. You can go home after 30 minutes of receiving the Botox if you have passed urine and feel well enough to travel home.

After your first treatment of Botox, you will attend 2 weeks later for a bladder scan to check you are emptying your bladder fully. Advice regarding frequency to catheterise, if needed, will be given at this appointment. Once you are established having regular Botox injections you can self-refer into the service – further information will be provided when you're ready to self-refer.

Are there any alternatives?

You have been offered this treatment because other treatments have not worked. Alternative treatments to Botox include different tablets or Percutaneous Tibial Nerve Stimulation (PTNS). This involves inserting a very small needle into the ankle, similar to acupuncture, this will be discussed in more detail in clinic. Very rarely patients with very severe symptoms are offered major surgery to increase the size of their bladder (clam cystoplasty) or to divert their urine into a bag worn on the skin (urinary diversion).

What are the side effects of this treatment?

No operation is without risk; however, the majority of procedures are carried out without any problems. Please read this section and discuss any concerns with your doctor.

About one person in six may have difficulty emptying their bladder. This could last a few days or weeks. If you have this kind of difficulty, we would advise you use the catheters intermittently until you can pass urine normally.

Operation side effects

There are side effects when the drug is given for muscle diseases such as cerebral palsy – but these are rare. They include weak muscles near the injection site, flu like illness, aching muscles and a feeling of nausea.

We don't know what all the side effects are when the drug is injected into the bladder, but they are likely to be less than the side effects for muscle diseases because the dose is lower.

Useful Websites

www.incontact.org

www.2womenshealth.com

www.promocon2001.co.uk

www.continence-foundation.org.uk

This leaflet can be made available in different formats on request. If you would like to make any suggestions or comments about the content of this leaflet, then please contact the Patient Experience Team on 0151 702 4353 or by email at pals@lwh.nhs.uk

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