

Information Protocol

Injection of Botulinum Neurotoxin Type A (Botox) into the Bladder

Name:

First name:

Date of birth:

Dear patient,

This page should provide you with information, not worry you. It is only part of the information you will receive. The planned intervention will be discussed with you in person. Please ask about anything that is unclear or seems important, and don't hesitate to say if you would prefer not to know too much about the forthcoming procedure.

Reasons for injecting botulinum toxin into the bladder:

You suffer from a pronounced irritable bladder; drug therapy has not been successful or had to be discontinued because of side effects. Botulinum toxin inhibits the excitation transmission of nerve cells to the muscles, whereby the contraction of the bladder muscle weakens or even ceases depending on the dosage of the drug, thus improving such irritable bladder complaints as urinary urgency.

Alternatives:

In addition to physiotherapy with bladder training, drug therapy is very effective. Often, side effects such as constipation, dry mouth, and eye flutter force discontinuation of therapy or there are contraindications such as increased ocular pressure. The side effects can be circumvented with a local instillation of these drugs into the bladder. This requires regular self-catheterization. A more invasive alternative is to implant a bladder pacemaker which controls the bladder externally.

Operation method:

When botulinum neurotoxin ("Botox") is injected into the bladder, the dosages are about 1/20 or even less of the dose considered dangerous. "Botox" is injected through cystoscopy, visualized, at 10-20 different locations in the bladder wall or muscle. Usually this can be done under superficial general anesthesia, regional anesthesia or only local anesthesia. The procedure can be performed on an outpatient basis or as a short-term hospitalization.

Likelihood of success:

The success rate is approximately 80%. The effect does not occur immediately, but only about 2-3 weeks after the procedure. According to the literature, the duration of action is 2 to more than 9 months. The average re-injection rate is approximately 28%.

Risks and complications:

Side effects are rare. Immediate perioperative complications can include mild bladder irritation, bleeding from the bladder and thus the need for prolonged indwelling catheter therapy. A urinary tract infection can also occur as a rare complication and must be treated with antibiotics. Very rarely, as a side effect, particularly in the presence of other nerve diseases (e.g. myasthenia gravis), a disturbance of the entire musculature can occur, which is why monitoring in the hospital is recommended. Some side effects only occur after onset of action (after 2-3 weeks). These might include a weak urinary stream, urinary retention or a feeling of retained urine. In some cases (approx. 4%), until the drug effect decreases, persistent residual urine discharge by means of daily single-use catheterization or Cystofix insertion is necessary until the Botox effect subsides. Despite proper patient positioning and correct equipment connection, pressure-related and other damage to nerves and soft tissues can occur as very rare complications. Only rarely do these leave permanent symptoms (e.g. numbness, painful sensations) or scars.

After the operation:

The patient may be discharged the same day. At most, you will have only a few hours in the hospital

with an indwelling catheter. Bladder function should be checked two weeks after the operation: The residual urine is measured in terms of quantity and bladder infection. The effect of Botox lasts several months; then the toxin is broken down again by the body. If necessary, the injection can be repeated after 6-9 months.

Costs:

The prescription of botulinum toxin for bladder complaints / irritable bladder is approved in Switzerland for neurological and so-called idiopathic (cause unknown) irritable bladder.

Your questions:

Explanatory consultation

Interpreter:

Proposed operation:

Notes of the doctor for the information interview

(waiver of explanation with indication of the reason, individual risk-increasing circumstances: age, heart disease, obesity, etc.).

Other treatment options:

Date:

Time:

Duration of explanatory
consultation:

Treatment order:

Dr. _____ has had an informative talk with me. I understood the explanations and was able to ask any questions I had.

I agree with the proposed procedure, as well as with the changes and extensions discussed that may be required during the operation.

Place, date:

Patient:

The text on the front page was discussed with the patient, the questions answered, and a copy of this explanation protocol was given to the patient.

Date, time:

Doctor:

Operation outline:

(Operation method, skin incision, what is removed, reconstructed, etc., side designation left, right)
