

TRANSVESICAL PHENOL NERVE BLOCKS IN THE TREATMENT OF NEUROGENIC DETRUSOR OVERACTIVITY IN SPINAL CORD INJURY AND MULTIPLE SCLEROSIS

Hypothesis / aims of study

To evaluate the impact of Transvesical Phenol Nerve Blocks (TVPNB) in the treatment of Neurogenic Detrusor Overactivity in Spinal Cord Injury and Multiple Sclerosis patients, refractory to antimuscarinic drugs.

Study design, materials and methods

We examined the last 115 patients with Neurogenic Detrusor Overactivity who needed adjunctive treatment for interval incontinence. The retrospective review of the data for the 101 patients, who underwent TVPNB were evaluable. The urodynamic studies were reviewed to confirm the type of detrusor overactivity (Phasic Detrusor Overactivity versus Low Bladder Compliance). The patient records were examined and each was contacted by questionnaire or telephone interview. Success was measured by reduction in incontinence events (IE) per day/week, reduction in frequency of Clean Intermittent Catheterisation, improvement in functional bladder capacity and abolition of Autonomic Dysreflexia if present. Adverse events were recorded. Duration of response was estimated from medical records and patient recall.

Results

Of 35/51 patients with Spinal Cord Injury undergoing TVPNB for incontinence, 74% had reduced incontinence of which 69% had >50% reduction in IEs while 5% had <50% reduction in incontinence episodes. The remaining 26% showed no improvement. Amongst 41/50 patients with Multiple Sclerosis undergoing TVPNB for incontinence, 95% had reduced incontinence of which 85% had >50% reduction, usually to complete dryness, while 10% had <50% reduction in IE. The remaining 5% showed no improvement. One patient required IV antibiotics for 4 days for UTI, but most adverse events were mild, transient and self limiting.

Interpretation of results

TVPNB have been overlooked in the treatment of Neurogenic Detrusor Overactivity. We specifically avoid subtrigonal injections which gave the technique a bad reputation 25 years ago due fistula formation. This simple 10 minute procedure using no more than \$A72 worth of materials is an alternative to Intravesical Botox A injections. The procedure appears to be cost effective and safe.

Concluding message

Transvesical Phenol Nerve Block is a viable treatment of Neurogenic Detrusor Overactivity. TVPNB has been safe, effective and inexpensive. In developing countries with limited resources, TVPNB should be considered.

References

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Disclosures

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