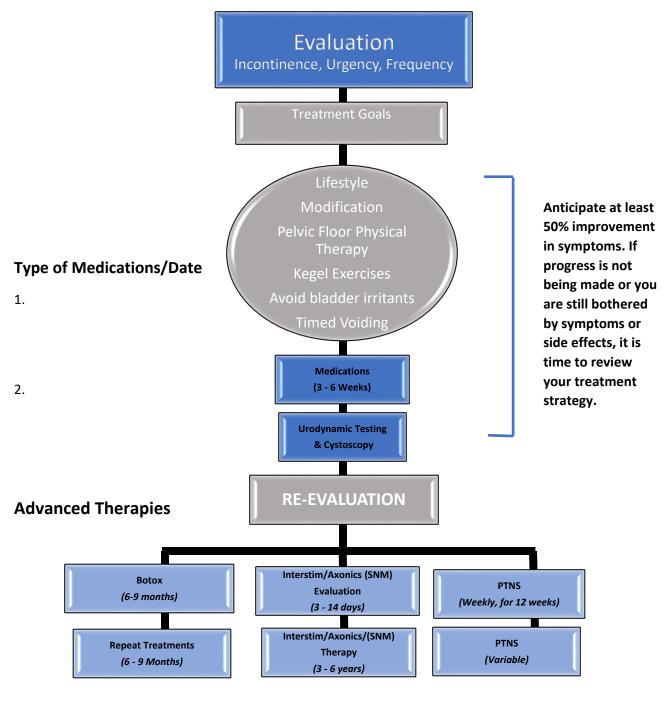


# Women's Health Center Overactive Bladder Treatment Plan



Contact us for your Bladder Health Questions 781-762-0471 www.greaterbostonurolgy.com

### What happens if medication does not work for me?

If you have tried behavioral modifications and medications, and still suffer from bothersome Overactive Bladder, you have what is called Refractory Overactive Bladder Syndrome. Sometimes this represents a more severe form of OAB. Advanced therapies may be indicated such as PTNS, SNS, and Intravesical Botox.

### PTNS (Percutaneous tibial nerve stimulation)

This therapy is performed in an office setting, and involves stimulation of the posterior tibial nerve, similar to acupuncture. The treatment requires 12 weekly sessions. If you respond well, we will discuss long-term options. Patients that respond well are excellent candidates for Sacral Nerve Stimulation.

## Interstim/Axonics (SNM)

Interstim/Axonics (SNM) is a minimally invasive technique that can be performed in a same day setting or in the office. With this technique, a small wire is placed near the nerves in your pelvis to restore normal bladder function. The testing is typically done in two phases.

Interstim/Axonics (SNM) allows patients to try the therapy for about one week. A trial is considered successful if you experience a MINIMUM improvement of 50% from your bothersome urinary symptoms. After the trial period, the patient and provider will decide if the long-term option is the right choice. The long-term stimulator is placed under the skin in the buttock region in an outpatient setting. A significant advantage of this therapy is that, when successful, it can lead to lifelong control. This therapy is also reversible. Medtronic.com/bladder.

#### **Intravesical Injection of Botox**

This is a minimally invasive procedure often performed in an outpatient setting. It involves injection Botox (OnabotulinumtoxinA) directly into the bladder wall through a scope. Bladder injections are typically repeated every 6-12 months, depending on response. There is a small percentage of patients who may be unable to urinate and may have to self-catheterize for some period of time immediately following the procedure.