OP6

AUDIT OF PTNS SERVICES IN A TERTIARY CENTRE

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Introduction:

Percutaneous Tibial Nerve Stimulation (PTNS) is an established treatment modality for treating pelvic floor disorders, primarily overactive bladder (OAB). It is a minimally invasive procedure with a good efficacy, safety profile(1) and is cost-effective (2)

<u>Aim:</u>

Audit of local services against National Institute for Health and Care Excellence (NICE) guidelines 123 in preparation for a more extensive departmental review of services. Standards were set to 100% of patients with an established indication to receive PTNS should have 1) tried oral medication prior to PTNS, 2) Offered Botox, 3) undertaken Urodynamics in case of LUTS, 4) discussed in the local MDT.

Methods:

A retrospective case note review of 50 women who received at least 12 PTNS sessions in the last 12 months. Patients were identified through patient coding, clinic and from the computer system(Lorenzo). Patient Global Impression of Improvement (PGI-I) scores 1-2 were taken as successful.

Results:

A total number of 61 cases were identified;19 were duplicates, 10 were excluded (received less than 12 sessions(N=5)and lack of documentation(N=5)), and 32 cases were audited. OAB was seen in 68% (n=22)of patients. Voiding dysfunction, pain, and bowel symptoms were seen in 3% (n=1) of each patient with a lack of documentation for 25% (N=8) of patients. 1) Prior to PTNS, 94% (n=30) of patients tried at least 1 oral medication, 69% (n=22) had tried 2 or more oral medications. 2)75% declined Botox, 15% failed Botox.3)84% (n=27) had prior Urodynamics. 4) 81% had documented MDT discussions. A PGI score of 1 or 2 was seen in 69% of patients, 81%(n=26) had more than 12 sessions.

Conclusion:

34% (n=11) met all audited criteria). Documentation aids will help improve adherence to NICE guidelines. Local outcomes are comparable to the published literature. The average number of sessions received were more than the allocated 12 treatment sessions.

References:

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