

OP23

EQUIVALENT EFFICACY OF SNS PNE IN PATIENTS WITH AN UNDERLYING DIAGNOSIS OF VD OR DO, AND IN PATIENTS STRATIFIED BY PRESENCE OR ABSENCE OF PSYCHIATRIC CONDITION

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Introduction

There is debate regarding the efficacy of Sacral Nerve Stimulation (SNS) in patients with underlying voiding dysfunction (VD) vs detrusor overactivity (DO), or in patients with previous psychiatric diagnosis, concurrent opiate prescription or previous intradetrusor botulinum toxin A therapy. We evaluated the outcomes of SNS percutaneous nerve evaluation (PNE) in our regional referral centre.

Methods

Patients were prospectively recorded who underwent PNE at a regional Scottish centre, 2019-2022. VD and DO were defined per ICS guidelines following urodynamic evaluation. Primary outcomes were success of PNE comparing VD and DO, and in those with psychiatric condition, botulinum therapy, or opiate prescription. Successful PNE was defined as subjective and objective improvement in patient symptoms at 2 weeks.

Results

In 71 patients who underwent PNE, 47 had a diagnosis of VD and 24 had DO. 36 patients (51%) were deemed to have successful PNE. There was no difference in success between those with VD (n=25, 53%) or DO (n=11, 46%, p=0.74). In individuals with a prior psychiatric diagnosis, there was no difference in success between those with underlying VD (n=19, 79%) or DO (n=6, 46%; p=0.07). There was a significant difference in success in patients with VD based on presence of psychiatric diagnosis (n=6, 26% no prior psychiatric diagnosis; n=19, 79% psychiatric diagnosis, p<0.001). There was no difference in success according to previous botulinum toxin treatment (no botulinum n=22, 67%, botulinum n=11, 42%; p=0.07). There was no difference in success according to opiate use (no opiate use n=17, 53%, opiate prescribed n=13, 57%; p=1.00).

Conclusions

We demonstrate in a regional centre overall PNE success of 51%, with no difference in success according to underlying diagnosis of VD or DO, concurrent opiate use, prior botulinum or a prior diagnosis of psychiatric condition. In patients with VD, PNE was more likely to be successful in those with a prior diagnosis of psychiatric condition.