

OP7

HOW PAINFUL IS OUTPATIENT BLADDER BOTOX

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Background

Intravesical Botox® Injection is a popular treatment for refractory overactive bladder. This procedure is commonly performed in outpatient departments. Various analgesic protocols have been explored. This project aims to determine the benefit of pre-treatment oral analgesia and Entonox on pain during the procedure as measured by visual analogue pain scores (VAS).

Methods

The project was registered as a service evaluation. All patients were advised to take oral paracetamol / Ibuprofen 1-2 hours pre-treatment. Consecutive patients attending for treatment over a 6-month period were asked their procedure-related VAS pain scores (0-10) and whether they would recommend this treatment to a friend/family. Statistical analyses were performed using SPSS® 28.0 package (IBM, Chicago, IL)

Results

There were 91 participants with a mean age of 63. The mean pain score was 4.21 ± 2.35 . 100% of participants would recommend bladder Botox® injection to friends/family. There was no statistical difference between the mean pain score of patients who received no analgesia and those who received combination of analgesia ($p=0.0624$), analgesia at home ($p=0.06624$), and Entonox ($p=0.9875$).

Conclusion

There was no statistical difference between the mean pain score in patients who received combined analgesia or one method of analgesia and patients who did not receive them. The patients who received combined analgesia do not appear to have improved pain scores, which may reflect a lower pain threshold. Pain scores did not impact on whether the patient would recommend the treatment to a friend/family.