

Gynaecology

Percutaneous Tibial Nerve Stimulation (PTNS)

What is PTNS?

Bladder and bowel function is controlled by a group of nerves called the sacral plexus. Stimulation of these nerves can help to improve bladder and bowel problems and is achieved using an implantable stimulator or by PTNS.

PTNS is a minimally invasive, outpatient procedure to improve overactive bladder symptoms (OAB). OAB is a condition that causes urinary symptoms, including: needing to visit the toilet more frequently accompanied by urgency (a sudden desperate need to pass urine) with or without urgency incontinence (leaking before you can get to the toilet) and/or needing to get up often in the night to pass urine. OAB is common, affecting at least 10% of the adult population (men and women). It is more common in older people, those who have had pelvic surgery and people with neurological disease. However, most people have no obvious cause for their overactive bladder symptoms.

Why do I need this treatment?

If you suffer from OAB symptoms, PTNS is offered when other more conservative measures and medications have not worked for you. Conservative measures include: changing your fluid intake, reducing caffeine, bladder retraining, smoking cessation and treating constipation.

What does the treatment involve?

You will be asked to sit in a chair or couch with your leg elevated. A fine, acupuncture-like needle is inserted near a nerve above the inner side of your



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ankle and a sticky pad is attached to the arch of your foot (Figure 1). The needle is connected to a battery-operated stimulator, which delivers a mild electric current along the needle into the tibial nerve (part of the sacral plexus of nerves which control bladder function) for 30 minutes (Figure 2). There is usually a tingling/buzzing sensation in the ankle, foot or toes and your toes may spread out or curl. However, the current can be turned down if the sensation is too strong.

The treatment usually consists of 12 sessions lasting 30 minutes each once a week over 3 months. If you wish you can bring music, magazines or books to distract you. It is important to the success of the PTNS that there are no long breaks during the treatment course, so if you have a holiday planned it is best to delay the start of the treatment until after the holiday. Most patients will need top-up sessions after the initial course at variable intervals.

Figure 1: Position of the needle.

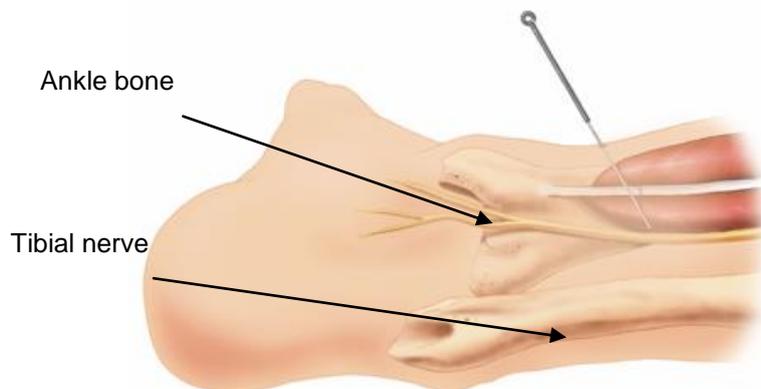


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Figure 2: Patient undergoing PTNS.



How effective is PTNS?

Studies looking at the effect of PTNS show that up to 55% of patients are cured of their symptoms and up to 90% are improved after a full course of treatment. However, it may take up to 12 weeks before seeing any change. You will be asked to stop any medication you take for your OAB symptoms around 8 weeks into your course of PTNS. The effects of the treatment wear off with time, but in patients who have top-up treatments the beneficial effects are usually maintained.

Are there any risks of side effects?

The most common side effects are minor irritation, redness and/or bleeding where the needle has been inserted. You might experience short-lived foot or toe numbness. These symptoms usually go away within a few hours. In studies there has been one report each of generalised swelling, worse incontinence, headache, blood in the urine, inability to tolerate stimulation, leg cramps, foot or toe pain, and dizziness or fainting in response to the needle being inserted.

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Are there any alternatives?

Other treatments include:

- Botulinum toxin A (Botox) injections into the bladder wall.
- Sacral nerve stimulation.
- Major reconstructive surgery.

Your specialist will be happy to discuss these with you.

Where can I find more information?

For more information, visit:

www.YourPelvicFloor.org

<http://www.bladderandbowelfoundation.org>

<http://www.nice.org.uk/nicemedia/live/12412/51321/51321.pdf>

If you require any further information please call 024 7696 7000

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