



Urethral bulking for stress urinary incontinence

This leaflet is for women with stress urinary incontinence who have been offered urethral bulking agents to treat their symptoms.

What is stress urinary incontinence?

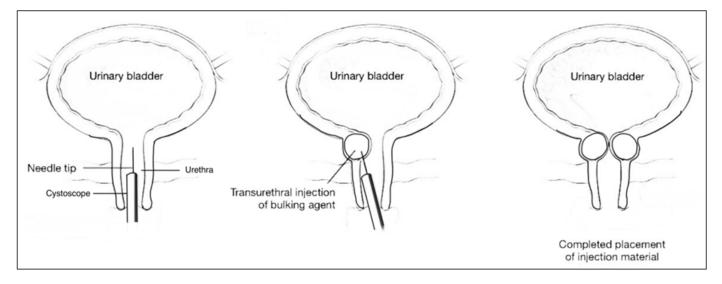
Stress incontinence is the leakage of urine caused by activities such as laughing, coughing, sneezing or exercise.

It occurs due to weakening of the tissue surrounding the neck of the bladder. Being overweight can make symptoms worse.

What is urethral bulking?

Urethral bulking is a small operation where a gel-like substance is injected into neck of the bladder (urethra) using a small telescope. It 'bulks up' the bladder neck to minimise or stop leakage.

There are different substances used for urethral bulking. The Royal Berkshire Hospital uses Bulkamid, a gel that is over 97% water.



Before the procedure

Most women will have had pelvic floor exercise training with a specialist nurse or physiotherapist. You will be offered urethral bulking if pelvic floor exercises have failed.

What will happen on the day of surgery?

You will come into hospital and usually have a short general anaesthetic (you are asleep). Some women choose to have this operation under local anaesthetic. The urethral bulking operation takes about 20 minutes and most women will go home on the same day.

What can I expect after the operation?

- If you are able to pass urine easily, you will be discharged home on the same day.
- You should be able to resume all your normal activities once you recover from your general anaesthetic (usually 24-48 hours).
- If successful, urethral bulking will last for 2 to 7 years. After this time, urethral bulking can be repeated.
- If unsuccessful, urethral bulking can be repeated a few months after the original injection.

What are the benefits of urethral bulking?

- 7 in every 10 women are either dry or significantly improved after one or more urethral bulking injections.
- Urethral bulking is a minor procedure that is very low risk and quick to recover from.
- If you wish, you can have urethral bulking under local anaesthetic (when you are awake).

Disadvantages and side effects

The complications that can occur after urethral bulking are uncommon and short lived.

- Approximately 6 in 100 women are unable to pass urine immediately after the urethral bulking injection. This is a temporary side effect. These patients will have a thin catheter (tube) passed into the bladder to help bladder emptying. This is usually removed in less than 24 hours.
- Less than 1 in 100 women are unable to pass urine normally for more than a few days/weeks. These women will learn to empty the bladder with a small disposable tube (catheter) until the bladder empties normally.
- 4 in 100 women will get a bladder Infection.
- 30 in 100 patients will gain little or no improvement of incontinence symptoms
- A few patients will experience a burning sensation when passing urine for one to two days after their operation.
- A few patients will pass blood-stained urine for one to two days after their operation.

Are there alternative operations to urethral bulking?

Yes, there are two other operations for stress urinary incontinence that are available in the UK and are recommended by The National Institute for Health and Care Excellence (NICE).

These operations are the:

- 1. Colposuspension
- 2. Autologous sling

As these are bigger and more complicated operations, the Royal Berkshire Hospital will often recommend the urethral bulking operation first.

If you would like more information on the alternative operations, please ask your doctor or specialist nurse.

Further information

You can find more information by visiting the following website links:

- <u>https://bsug.org.uk/budcms/includes/kcfinder/upload/files/Urethral%20bulking%20BSUG%20</u> <u>Mar%202018.pdf</u>
- https://www.baus.org.uk/_userfiles/pages/files/Patients/Leaflets/Urethral%20bulking.pdf
- https://www.bulkamid.com/

To find out more about our Trust visit <u>www.royalberkshire.nhs.uk</u>

Please ask if you need this information in another language or format.

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