

Botox for Bladder and Sphincter Control

Botox is a medicine that can help with over-active bladders and sphincters when other medicines and treatments do not work.

What is Botox?

Botox is a medicine made from a kind of germ (bacteria) called *Clostridium botulinum*. Small amounts of Botox are used to treat some health problems. Since the 1980s, Botox has been used safely and effectively to treat eye muscle spasms, frown lines, migraine headaches and too much sweating. It has been used to treat bladder problems since the late 1990s.

How is Botox used for bladder control?

Increased bladder activity can make it hard for the bladder to store pee (urine). Botox can help to relax the bladder so that the bladder may hold more pee for longer periods of time

How is Botox used for urinary sphincter control?

Botox can be used in children who cannot relax their urinary sphincter. The urinary sphincter (and pelvic floor muscles) need to be relaxed to help empty the bladder completely.

Is Botox an option for my child?

To find out if Botox is an option, your child will meet with a urologist. The urologist will have a urodynamic study done on your child. This study lets the doctor see how your child's bladder and urinary sphincter work. Based on the results of the urodynamic study, we will schedule your child for a procedure to give the Botox. (see our handout "Urodynamics Study (UDS)" seattlechildrens.org/pdf/PE541.pdf)

Botox can be a good choice when other medicines and treatments do not work. It works well for children who cannot take other bladder-relaxing medicines.

How is Botox given?

Botox is injected into the bladder wall in a procedure called a cystoscopy (sis-TOS-kuh-pee). We mix small pieces of Botox with sterile saline water to create a solution. Your child will be given medicine (anesthesia) to make them sleep without pain during the procedure. While your child sleeps, the surgeon injects the Botox through a long, thin tube through the urethra.

A small camera placed inside the bladder (called a cystoscope) helps the surgeon place 20 to 30 small injections inside your child's bladder wall. In most cases, your child will not need to spend the night in the hospital after this procedure.

To Learn More

- Urology
206-987-2509
- Ask your child's healthcare provider
- seattlechildrens.org

Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.

What should I expect after the procedure?

For up to 24 hours, your child may:

- Have pee that looks pink.
- Have a hard time peeing.
- Notice a burning feeling while peeing. Effective pain control will help your child feel better and heal faster. Please read the pain section of this handout to learn more.

When may my child eat?

- When fully awake, your child may have clear liquids like 7-Up, Jell-O, Popsicles and apple juice.
- Nausea and throwing up are common after surgery. If this happens, slowly give your child a clear liquid diet.
- If your child is not sick to their stomach or throwing up and is fully awake, your child may start their normal diet.

Will my child have pain?

Your child will likely notice a burning feeling while peeing the first few times after the procedure. We partner with you and your child to prevent and relieve pain as completely as possible. No matter the level of your child's pain, believe they are hurting and respond right away.

Give your child lots of water. Watering down the pee will help get rid of the burning or stinging feeling. If your child has a hard time peeing, it may help to have your child sit in a tub of warm water and try to pee. Smaller children will often pee when they fall asleep. Have your child pee at least every 3 hours after the procedure during the daytime.

How much activity can my child do?

Watch your child closely the day of the procedure. Most children can go back to normal activity in 24 hours.

When should I call a doctor?

If your child is having any problems, call our office at 206-987-2509 during the day. After hours, call 206-987-2000 and ask the hospital operator for Urology.

Call us if your child has any of these warning signs:

- Fever higher than 101.5°F (38.6°C)
- Bright red urine or a lot of blood
- Your child has pain not controlled by the methods described above
- Inability to pee 8 to 12 hours after the procedure