

Outpatients Intradetrusor OnabotulinumtoxinA Injections for OAB: Safety, Feasibility and Long-Term Patient Satisfaction

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INTRODUCTION

Intradetrusor OnabotulinumtoxinA (Onabot/A) is an established treatment for overactive bladder (OAB). **We assessed the feasibility, safety and long-term patient satisfaction of outpatient injections in idiopathic (iOAB) and neurogenic OAB (nOAB).**

METHODS

Patients with iOAB or nOAB received outpatient Onabot/A injections (100 U or 200 U, respectively) under intravesical lidocaine anesthesia. Patients with spinal cord injury at or above T6 or recurrent UTIs were excluded. **Baseline evaluation included a 3-day voiding diary, urinalyses and urine culture, uroflowmetry, and post-void residual volume (PVR); these assessments were repeated during follow-up.** Patients received 3 days of antibiotic prophylaxis and were observed for 60 minutes after the procedure. Complications, satisfaction (VAS#1), procedural pain (VAS#2) and willingness to repeat the procedure were recorded. Follow-up visits took place at 1 and 3 months, then every 6 months.

RESULTS

Among **142 patients** (93 iOAB, 49 nOAB), mean follow-up was 75.2 ± 5.3 months. **Most clinical outcomes improved significantly** (Table). Eighty-six patients (60.6%) received *repeat injections*. Mean satisfaction and pain scores were 7.7 ± 0.4 and 4.9 ± 1.2 , respectively. Satisfaction was higher after repeat injections ($p < 0.001$). *No major complications occurred*, and all patients were willing to repeat the outpatient procedure.

Outcome	Baseline (mean $\pm$ SD)	Last follow-up (mean $\pm$ SD)	p
Idiopathic OAB · 100 U (n=93)			
Daytime frequency (episodes/day)	12.4 ± 3.5	6.3 ± 3.3	<0.001
Nighttime frequency (episodes/night)	4.6 ± 1.6	1.8 ± 1.7	<0.001
Urgency (episodes/day)	9.1 ± 2.6	3.6 ± 1.2	<0.001
Urgency Incontinence (episodes/day)	5.9 ± 1.4	2.1 ± 1.3	<0.001
Qmax (mL/s)	28.5 ± 2.2	21.7 ± 3.5	<0.001
PVR (mL)	18.6 ± 12.4	60.2 ± 44.5	<0.001
Neurogenic OAB · 200 U (n=49)			
CIC/day	3.3 ± 1.3	4.3 ± 1.2	0.06
Urgency (episodes/day)	8.4 ± 1.3	1.6 ± 1.7	<0.001
UI (episodes/day)	6.2 ± 1.1	0.7 ± 1.2	<0.001

CONCLUSION

Outpatient intradetrusor Onabot/A injections **were feasible, safe, and well tolerated in both iOAB and nOAB**, with sustained symptom improvement and high patient satisfaction.