Title: Sacral nerve stimulation for refractory urinary urge incontinence

or urinary retention June 2000

Agency: Medicare Services Advisory Committee (MSAC)

Commonwealth Department of Health and Ageing GPO Box 9848 Canberra ACT 2601 Australia

http://www.msac.gov.au

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Aim

To assess the safety and effectiveness of the procedure and under what circumstances public funding should be supported for the procedure.

Conclusions and results

Safety Incidence of adverse events is relatively high (50%), with one third

requiring further surgery and devices removed in 9% of cases. The major problems were pain at the pulse generator or lead implant site and lead

migration.

Effectiveness One randomised controlled trial indicated benefit for females with urge

incontinence (durability of benefit is 18 months –5 years), and urinary retention (18 month durability). Impact on quality of life is uncertain.

Cost-effectiveness The procedure is expensive: the cost per patients freed of urge

incontinence is estimated at \$35,000 at six months follow-up.

Recommendations

Public funding not be supported at this time because of relatively high rates of adverse events, uncertain long-term effectiveness and unfavorable cost-effectiveness ratios.

Method

MSAC conducted a systematic review of the biomedical literature from 1988 to October 1999 by accessing biomedical electronic databases, the Internet and international health technology agency websites.

Further research

Further research is required on recent refinements to the device and procedure especially as these effect safety, long-term effectiveness and quality of life changes.

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