# TRANSCUTANEOUS STIMULATION IN THE TREATMENT OF OVERACTIVE BLADDER ABOUT A CASE

## Dalal Radjaa Miloudi<sup>1</sup>, Sara Zouaoui<sup>2</sup>, Mohamed Kehli<sup>1</sup>

Military Hospital, Algeria

e-mail: dalalradjaamiloudi@gmail.com

## **Background and Aims**

we report a case of bladder hyperactivity treated by neurostimulation of the posterior tibial nerve The clinical course depends on the early management.

### **Methods**

The patient was hospitalized at the PRM level where clinical and paraclinical examinations were carried out: •Clinical Review: "Irritative Spine Research"; Muscle Review; Neurological Spasticity Assessment; Functional Disability Assessment" Neurological and perineal clinical examination •a voiding schedule •Ultrasound with post-urination residue measurement Finally, a urodynamic assessment was carried out during the second hospitalization with cystomanometry, sphincterometry and debimetry with residue measurement returning in favor of an overactive bladder causing urinary leakage. high pressure urination with a low flow rate testifying to a vesico-sphincter dyssynergy.

#### Results

The patient is supported: •Treatment of irritating spines and spasticity. •rehabilitation protocol adapted to paraparesia •Treatment with anticholinergic and alpha-blocker. •Intermittent self-urinary catheter •Transcutaneous stimulation sessions (or TENS), with an electrode positioned behind the inner malleolus and the second 10 cm above (10Hz, 0.5 to 15mA approximately). 01 session per day of 20 minutes during12 weeks. The evolution was marked by a net decrease in the frequency of urinary leakage at 01 times per 15 days. Vesico-sphincter disorders are extremely common and harmful in the neurological patient. •Importance +++ of their screening, monitoring and management adapted. The urinary schedule, residue measurements, screening of factors favoring. •Prescription of suitable complementary examinations. •Tibial stimulation appears to be an effective treatment for patients with HV in patients with a neurological bladder. the technique is safe, without major complications reported in the literature. Tibial stimulation may be proposed at the beginning of HV treatment in latest EAU recommendations.

#### **Conclusion**

Associated with perineal rehabilitation, stimulation of the posterior tibial nerve - or internal popliteal sciatic nerve (SPI) - seems to become a serious alternative to taking medication in cases of overactive bladder, with or without urinary incontinence.

**Keywords:** Transcutaneous stimulation tibal nerve, of overactive bladder