Patient Information Sheet



PERCUTANEOUS TIBIAL NERVE STIMULATION (PTNS)

Introduction

Percutaneous nerve stimulation (PTNS) involves stimulating the bladder nerves with electrical pulses transmitted indirectly through the tibial nerve in the leg that runs next to it. These pulses help to modify the signals that control bladder function. This 30 minute procedure is done in the clinic by placing a small acupuncture needle near the ankle.

What are the alternatives?

There are three main procedures used in managing OAB. The first two options, PTNS and sacral neuromodulation (SNM) involve bladder nerve stimulation using electrical pulses. SNM works better than PTNS but is more invasive, as a small device that generates the electrical pulses is permanently implanted into the lower back and buttock areas. The third option involves injection small amounts of botulinum toxin or Botox® into the bladder to relax the muscle and reduce irritability. All three treatments are eligible for Medicare rebates and highly effective in reducing the number of toilet visits and accidents.

PTNS (2:47 mins) https://www.youtube.com/watch?v=-YpwjTcehVA

What does the procedure involve?

Percutaneous nerve stimulation (PTNS) is performed in the office by transmitting electrical impulses to the sacral nerve through a fine acupuncture needle placed near the ankle. In the initial phase, 12 treatments are administered weekly over 3 months. In the tapering phase, 5 further treatments are given over 3 months and finally, the treatment is given once a month or as required on a maintenance schedule.

What should I expect after each session?

Most people have no side-effects, but you may get minor discomfort or swelling for 24 hours at the needle site near the ankle. It will probably take 6-8 weeks to notice any change in symptoms. Treatment can be stopped at any time, although it is best to complete the first 12 sessions before deciding. You may continue using other bladder control treatments whilst having PTNS.