

THE INTRAVESICAL HEPARIN AND PERIPHERAL NEUROMODULATION ON INTERSTITIAL CYSTITIS

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INTRODUCTION & OBJECTIVES: We wanted to evaluate the therapeutic effect of the intravesical heparin and peripheral neuromodulation on patients with interstitial cystitis.

MATERIAL & METHODS: From March 2002 to May 2004, 12 female and 2 male subjects conform to the NIDDK criteria and not responsive to the previous conventional treatments were included in the study. Wisconsin pain scores, maximal cystometric capacities, night and day voiding frequencies were determined and these studies were repeated in the 2nd and 12th months of the treatment with 10.000 units intravesical heparin and peripheral neuromodulation. Frequency of the treatment was once a week during first 8 weeks, once in two weeks in following 8 weeks, and once in 3 weeks as four times. Then, it was decreased once in a month.

RESULTS: The mean follow-up period was 20 months (12-25). Day and night voiding frequency were significantly better in the 2nd and in the 12th months, when compared to pre-treatment values. The percentage improvement on Wisconsin pain scores were $62.5 \pm 13.9\%$ and $62.8 \pm 15.2\%$ in the 2nd and the 12th months, respectively. The average increase in the maximum cystometric capacity was $54.8 \pm 27.4\%$ and $52.5 \pm 31.6\%$ in the 2nd and the 12th months, respectively.

CONCLUSIONS: Intravesical heparin and peripheral neuromodulation combination looks to be an alternative for patients with interstitial cystitis not responsive to other treatments.

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