

## **Treatment of Interstitial Cystitis with BTX-A in Japan: The Second Report**

**Introduction and Objectives:** No specific medicine is available for interstitial cystitis (IC), which is therefore now being treated with hydrodistension plus medication. However, most cases are refractory to this treatment and recur after the treatment. In the field of Urology, botulinum toxin type A (BTX-A) has been reported to be effective for the treatment of IC but is not generally medicated because of its disapproval for health care services provided by health insurance in Japan. We have reported our experience last year. After then we had experiences to treat IC patients with injections of this agent into the urinary bladder wall include the trigone.

**Materials and Methods:** We injected 100 units of BTX-A (Botox<sup>®</sup>, Allergan Inc.) into the bladder wall, include the trigone, of 7 women and 2 men with a diagnosis of IC. We evaluated its efficacy by collecting questionnaires before and after the treatment: ICI Questionnaire- Short Form, Overactive Bladder Symptom Score, Interstitial Cystitis Symptom Index and Problem Index, and International Prostate Symptom Score.

**Results:** Every score was reduced after the treatment compared to before. The difference was statistically significant in ICIQ-SF and ICPI about total scores. Quality of life related to incontinence and symptoms of urinary storage was improved. Although pains were improved, were not statistically significant. It is recommended in recent studies that BTX-A be injected into the trigone of the bladder for IC therapy. We did inject the agent into the trigone, which does not make big difference account for our results.

**Conclusions:** We injected BTX-A into the bladder wall include the trigone for the treatment of IC, which was improved in symptoms of urinary storage.