

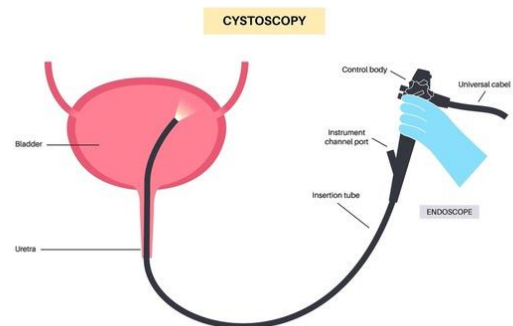
Cystoscopy and Bladder Botox

What is a Cystoscopy?

A cystoscopy (sis-Tos-kuh-pee) is a procedure that allows your doctor to examine the inside of your child's bladder and the urethra (tube that carries urine out of your body). The cystoscopy is done as an outpatient procedure and your child will go home the same day. During the cystoscopy your doctor may perform an x-ray (called retrograde pyelogram) to look at the ureters (the tubes that drain urine from the kidneys to the bladder).

When will I need a Cystoscopy?

A cystoscopy is recommended by your surgeon to see what the bladder and urethra look like. This is done to define the anatomy of the bladder and urethra, and to assess any problems such as bleeding, blockage or urinary tract infections.



What happens during a Cystoscopy?

Your child will receive general anesthesia to help them sleep and not feel pain during the surgery. Numbing gel will be used in the urethra. A cystoscope (thin tube with camera and light) will be placed through your child's urethra and into his or her bladder. The surgeon will look at the urethra and the bladder and its lining.

What is Botox?

Botox injection into the bladder is a well-established treatment for overactive bladder and urge incontinence. This typically includes incontinence and elevated bladder pressures associated with neurogenic bladder, in patients with spina bifida, spinal cord injury, cerebral palsy and other neurological conditions. In small doses, Botox temporarily paralyzes the bladder muscle and stops muscle movement, therefore increasing how much urine the bladder will hold and lowering the pressure inside the bladder.

When do I need a cystoscopy and bladder Botox?

It is recommended when behavior modifications and medications have not been effective in treating symptoms or a neurogenic behaving bladder.

What happens during a cystoscopy and Botox injection?

Your child will receive general anesthesia to help them sleep and not feel pain during the surgery. A numbing gel will be used in the urethra. A cystoscope (thin tube with camera and light) will be placed through your

child's urethra and into his or her bladder. The surgeon will look at the urethra and the bladder and its lining, and using a thin needle inject Botox directly into the muscle of the bladder.

Will my child be in pain?

Most children do well with the surgery. If your child is having discomfort, a pain medicine can help. You may alternate Acetaminophen (Tylenol) and Ibuprofen (Advil or Motrin). Do not give aspirin because it may cause bleeding.

What can I expect after surgery?

Before your child is discharged, you will be given written information about their care at home and any questions you have will be answered. Some blood in your child's urine is normal for a few days after the procedure. It can take 1-2 weeks or longer for the Botox to start working.

- **Diet:** Resume regular diet as tolerated. Have your child drink plenty of fluids, as there could be blood in the urine. This will keep the urine clear and make it less irritating to the bladder and urethra while peeing.
- **Activity:** May return to school or daycare when pain is well controlled.
- **Bathing:** Ok to take a bath the day of surgery. Bathe in plain water for the next week. A daily warm bath will help heal and provide comfort.
- **Medicines:** Pain can be controlled by alternating Acetaminophen (Tylenol) and Ibuprofen (Advil or Motrin).
Do not give aspirin because it may cause bleeding. If your child is prescribed an antibiotic, follow your surgeons' specific instructions.

What to call the surgeon for:

- Large amounts of bleeding or large clots in urine
- Fever over 100.5, especially if associated with burning or for frequency of urination
- Inability to urinate

Call your child's primary care provider for any other concerns.

Follow-up care:

Follow-up with your child's surgeon as directed following the surgery.
Call your surgeon's office to schedule an appointment, (612)813-8000 option #3.

Questions?

This information is not specific to your child but provides general information.

If you have any concerns further questions, please call our clinic at (612)813-8000 option #6
for the nurse message line. PSA RN 09/24 rev



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