Neurogenic bladder :-

→ From Slide (44)

* DM affect Smooth Sphincter " Internal Sphincter deficiency ".

non-neurogenic.

Detrusor overactivity :-

→ Anti-Cholinergics (& there SEs).

↳ to releive the pressure & protect the upper system + prevent urine leak.

→ behavioral therapy (befor anti-cholinergics).

avoid Caffiene البهارات ، الحراق ، الملح

Smoking ، البيبسي ، البرتقال ، اللمون

→ B agonist → TCA " imipramine "

→ Botulinum toxin. (A)

paralyse nerve ending of bladder (relax the bladder).

* every 6 months.

* If Cause retention, dt ↑ over relaxation → CIC Clean intermittant Cathetarization

كل 6 سالات تبغضي البول

→ Neuromodulation.

wire ، بحطوه في S_3 مكان ما بيطلع ال Stim.
للمثانة ، و التجربة لتعطيه very low current
↓
AP
↓ Contraction.

* 1st Trial ب tibial nerve Stim.

→ augmentation Cystoplasty
تكبير المثانة تقطعة من ileum
∴ ↑ Capacity
↓ pressure
+ CIC.
↓ لأنه دم تكون أضعف
المثانة في Contraction.

* Under active bladder
→ CIC.

* Dyssynergia
→ baclofen, dantrolene, diazepam.
→ Botulinum toxin injection into the Sphincter itself
→ Sphincteretomy

* Urethral incompetance

Stress incontinance pathophysiology-

→ ISD

→ Urethral hypermobility dt pelvic flow weakness by pregnancy & vaginal delivary

→ TOT TVT

transobturater tape procedure

& Trans vaginal tape