



Title **Sacral Nerve Stimulation for Refractory Urinary Urge Incontinence or Urinary Retention, June 2000**

Agency **MSAC, Medicare Services Advisory Committee**
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Aim

To assess the safety and effectiveness of the procedure and under what circumstances public funding should be supported for the procedure.

Conclusions and results

Safety: Incidence of adverse events is relatively high (50%), with one third requiring further surgery and devices removed in 9% of cases. The major problems were pain at the pulse generator or lead implant site and lead migration.

Effectiveness: One randomized controlled trial indicated benefit for females with urge incontinence (durability of benefit is 18 months to 5 years), and urinary retention (18 month durability). Impact on quality of life is uncertain.

Cost effectiveness: The procedure is expensive: the cost per patient freed of urge incontinence is estimated at \$35 000 at 6-month followup.

Recommendations

Public funding should not be supported at this time because of relatively high rates of adverse events, uncertain long-term effectiveness, and unfavorable cost effectiveness ratios.

Method

MSAC conducted a systematic review of the biomedical literature from 1988 to October 1999 by accessing biomedical electronic databases, the Internet, and international health technology agency websites.

Further research

Further research is required on recent refinements to the device and procedure especially as these effect safety, long-term effectiveness, and quality-of-life changes.