

Commissioning Statement:

Condition or Treatment:	Sacral Nerve Stimulation for Bladder Symptoms
Background:	<p>Sacral nerve stimulation, also termed sacral neuromodulation, is a type of medical electrical stimulation therapy.</p> <p>It typically involves the implantation of a programmable stimulator subcutaneously, which delivers low amplitude electrical stimulation via a lead to the sacral nerve, usually accessed via the S3 foramen.</p> <p>In line with NICE recommendations this policy has separate eligibility criteria and care pathways for men and women.</p>
Commissioning position:	<p>Policy: Women</p> <p>SNS for urinary incontinence or urgency-frequency syndrome in women will only be funded in accordance with the criteria below:</p> <ul style="list-style-type: none"> • Symptoms are refractory to lifestyle modification (caffeine reduction, modification of fluid intake, weight loss if BMI >30) <p>AND</p> <ul style="list-style-type: none"> • Symptoms are refractory to behavioural interventions: a minimum of 6 weeks of bladder retraining OR 3 months of pelvic floor muscle training (in mixed UI only, where there is some stress incontinence as well as OAB) <p>AND</p> <ul style="list-style-type: none"> • Symptoms are refractory to 4 weeks of anticholinergic medication to a maximal tolerated dose (a number of drugs may be tried in accordance with NICE CG171) (OR Mirabegron, in people for whom anticholinergic drugs are contraindicated or clinically ineffective or have unacceptable side effects (NICE TA290)) <p>AND</p> <ul style="list-style-type: none"> • The woman has been referred to secondary care, reviewed by an MDT and a diagnosis of detrusor over activity has been confirmed by urodynamic assessment <p>AND</p> <ul style="list-style-type: none"> • Symptoms are refractory to injections of Botulinum Toxin Type A into the bladder wall unless the patient is unwilling or unable to perform clean intermittent catheterisation. <p>Policy: Men</p> <p>SNS for men with overactive bladder (OAB) caused by detrusor over activity will only be funded in accordance with the criteria below:</p>

	<ul style="list-style-type: none"> • Symptoms are refractory to conservative management lifestyle advice, advice on fluid intake, supervised bladder training and use of containment products (pads, sheaths, etc.) <p>AND</p> <ul style="list-style-type: none"> • Symptoms are refractory to 4-6 weeks of anticholinergic medication (OR Mirabegron, in people for whom anticholinergic drugs are contraindicated or clinically ineffective, or have unacceptable side effects (NICE TA290)) <p>AND</p> <ul style="list-style-type: none"> • The man has been referred to secondary care for specialist assessment and a diagnosis of detrusor over activity has been confirmed <p>AND</p> <ul style="list-style-type: none"> • Symptoms are refractory to injections of Botulinum Toxin Type A into the bladder wall unless the patient is unwilling or unable to perform clean intermittent catheterisation. <p>Before a permanent SNS device is fitted, ALL prospective patients must have been approved for and have undergone a positive trial period (2-3 weeks) of temporary stimulation resulting in a 50% or greater improvement in voiding function based on the results of a voiding diary.</p> <p>SNS will not be funded for patients with:</p> <ul style="list-style-type: none"> • Stress incontinence, the most common type of urinary dysfunction • Urinary retention due to obstruction (e.g. from benign prostatic hypertrophy, cancer, or urethral stricture) • Urge incontinence due to psychological or neurological conditions, such as diabetes with peripheral nerve involvement, MS, stroke or spinal cord injury (see NICE CG 148).
Referral Guidance:	<p>Exceptional cases can be referred to the CCG's Individual Funding Request Panel for prior approval.</p> <ul style="list-style-type: none"> • HRW/SR GP Practices: https://ifryh.necsu.nhs.uk/ • HaRD GP practices: Referral Form
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Additional Information/References: