

What to expect after the procedure

- Some local discomfort may be experienced.
- Nerve stimulator may provide abnormal sensations, which your body adjusts to.
- A Representative from Medtronic will be in contact with you to check on your settings and responses.
- A review with Medtronic will be scheduled at 3 months, to confirm that the device is functioning optimally
- Further review appointments will be scheduled as required
- The battery should last between 7-10 years
- NB! Each person is unique and for this reason symptoms may vary!



See this live on:
vidscrip.com/urojo

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**PATIENT
INFORMATION
BROCHURE**

**SECOND
STAGE**

***SACRO
NEURO
MODULATION***

**PERMANENT
LEADS
&
IMPLANT**

Patient well-being is my first priority!

What next?

- A date will be set for a review by myself and Medtronic on regular intervals
- Please don't hesitate to direct all further queries to Dr Schoeman's rooms.

Second Stage Sacro Neuro Modulation

When the Temporary leads for SNM has proven to have given an improvement in symptoms a permanent lead placement is done

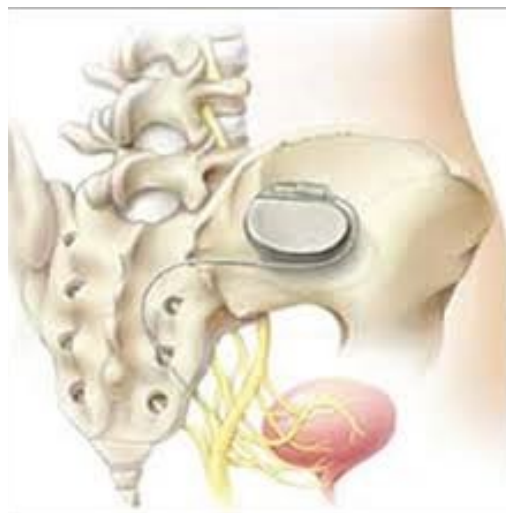
The aim was to alter the neuro-transmission from the Spinal Centre to the Bladder:

Why is it done?

- To alter the neuro-transmission from the Spinal Centre to the Bladder:
- Refractory Over Active Bladders with Urge Incontinence .
- Under Active Bladders
- Chronic Pelvic Pain
- Faecal Incontinence
- Causative factors:
Undetermined
Neurogenic causes such as Multiple Sclerosis

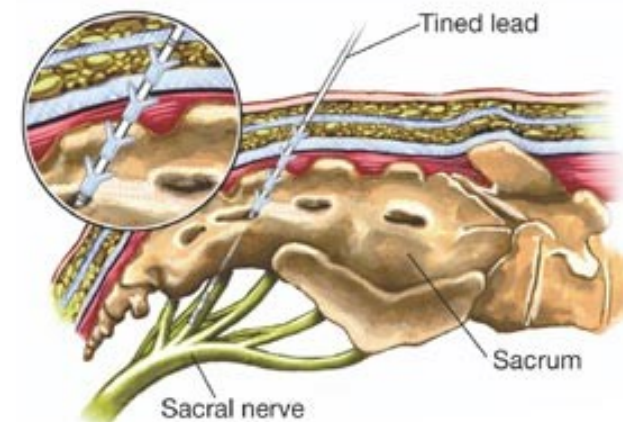
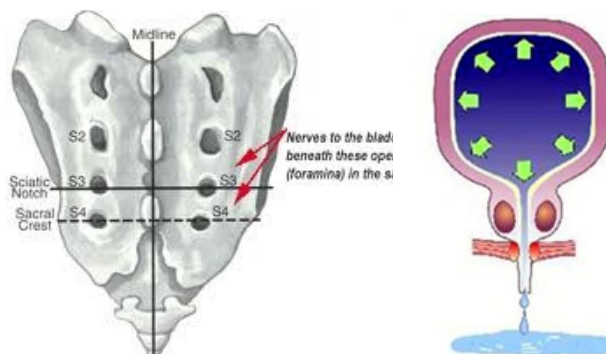
Pre-requirements

- An informed consent is required from the patient .
- Patients may not eat or drink from midnight the previous evening (not applicable if done under local anaesthetic) 8 hours NBM
- Patients are to refrain from smoking before the procedure.
- **Patients allergic to IODINE/CHLORHEXIDINE should clearly state this at pre-admission clinics as well as to theatre staff and Dr Schoeman**
- This is usually a day surgery procedure unless travelling from further than Brisbane
- Should not be on any anti-coagulation: Asprin, Plavix, Warfarin.



How is the permanent lead placement done?

- A sedation or GA is administered with local anaesthetic
- You will be placed prone (on your stomach) with lower back and buttocks exposed
- The timed lead that has been placed in the S3 foramina of the sacrum has been connected to an external battery
- The external lead connection will be removed and a larger pocket will be made for the permanent subcutaneous battery and connection
- Subcutaneous sutures will be placed, which will dissolve.



Post-operative care

- You will be given a remote device to control your settings
- It is not required that you fiddle with this, unless you do not have the desired effects
- The remote allows you to access 4 initial programs to switch between, to attain the desired effects
- The Medtronic representative is a phone call away. (mobile number provided) You would have received clear instructions as to the use prior to discharge
- A further 3 programs can be programmed should the initial 4 not be useful
- The device is simple to operate, don't be scared, you won't disrupt anything

