



**University
Hospitals Sussex**
NHS Foundation Trust

Having Botox injections into your bladder

Department of Urology

Patient information

What is this information about?

This information is about using Botox to help control the symptoms of an overactive bladder.

It explains:

- how a normal bladder should work
- what happens if you have an overactive bladder
- how Botox works
- how Botox is injected into your bladder
- any risks or side effects that you need to be aware of.

Why have I been given this information?

You have been given this information because you have the symptoms of an overactive bladder, and other treatment that you have tried has not worked for you.

It is important to be aware of the possible side effects of having Botox injected into your bladder. Reading this information will help you to know what to expect before you decide to have this procedure.

What is Botox?

Botox or Botulinum Type-A is a toxin produced by bacteria called Clostridium Botulinum. It is given intravesically.

This means it is injected into the bladder.

Botox treats overactive muscles. It acts by binding to the nerve endings of muscles, blocking the release of chemicals that cause the muscle to contract.

Why am I having Botox?

You have been diagnosed with overactive bladder syndrome.

This means that your bladder has trouble storing urine (pee) the way that it should. This is a common condition that can affect your quality of life, for example, taking part in social activities.

We often do not know what causes an overactive bladder.

What are the common symptoms caused by an overactive bladder?

- A sudden urge to pass urine (pee). This is called urgency.
- Unable to get to toilet in time (urge incontinence)
- A need to pee often.

How does the bladder work?

The bladder is a muscle shaped like a balloon that is used to store pee. In between visits to the toilet, the bladder relaxes and fills up with pee. When you go to the toilet, the bladder squeezes and the pelvic floor muscles relax. This lets the pee pass through a tube called the urethra.

There are two other muscles that help keep the bladder healthy and stop pee leaking out:

- **the pelvic floor**, which is made up of layers of muscles. This provides support and holds the bladder in place. It is found in both men and women.
- **the sphincter**, which is a circular muscle that goes round the urethra and forms a tight seal to prevent leakage.

When you go to the toilet the sphincter muscle relaxes so you can pee.

With overactive bladder syndrome, the bladder contracts, without your control, during storage. This causes an increase in the pressure in the bladder. This makes the sphincter relax and the bladder empty.

What are other treatment options?

Before having Botox injections in your bladder, it is usual to try other treatments first.

Some general changes to your lifestyle may help. This includes reducing the amount of caffeine or fizzy drinks you have. You may also have been recommended bladder training and regular pelvic floor exercises.

Medicines that help your bladder to relax, called anti-muscarinics or anticholinergics, may help with symptoms, usually as well as bladder training.

It is important to drink 1.5 to 2 litres of fluid each day. If you drink less than this, then increase the amount you drink gradually. Be careful what you drink: the acids in fruit juices can make symptoms worse for some people, so it is about finding what helps you.

What happens during the procedure?

This is a day case procedure. You will be asked to come to hospital on the day you are to have the Botox injections. You do not have to stay overnight.

You will be given an antibiotic. This is to help make sure that you do not get an infection because you are having the procedure.

Please let us know if you have any allergies.

You will either have a general or local anaesthetic (you may or may not be awake). The procedure takes about 20 to 30 minutes. We will use a special telescope to examine your bladder. This is called a cystoscope. The telescope is passed through your urethra into your bladder. Your bladder will be examined carefully. Then Botox is injected into your bladder wall through a special needle passed through the telescope.

What are the benefits, side effects and risks?

Botox injections should reduce the frequency, urgency and severity of urge incontinence in many patients, but some people do not experience any relief of their symptoms. Some people find that their symptoms are worse after the injections but this is very rare.

Botox sometimes works too well. This means that it can become difficult to pee after having the injections. Some patients (10 to 15 out of 100) will not be able to pee at all. This is called retention of urine. This does not happen immediately after the procedure. It could take up to a week.

If this happens, you will need to pass a hollow tube (catheter) into your bladder to empty it. This is called clean intermittent self catheterisation. You will be taught this technique before having Botox injected. You will be advised as to how many times you will need to pass the tube.

You will need to self catheterise until the Botox wears off and you start to pee normally again, fully emptying your bladder. This may take 6 to 12 months.

On very rare occasions, patients experience general muscle weakness or a flu-like illness following the injections. This may last for 1 to 2 weeks.

You may see blood in your pee. If this happens, please try to drink 1.5 to 2 litres of fluid per day.

Be aware

If you have any or a combination of the following symptoms, you may have a urinary tract infection (UTI):

- A sensation that you need to pee frequently
- Pain or discomfort when you pee
- Cloudy pee
- Pain in your lower back, just under your ribs, on either side
- Temperature.

If you develop these symptoms, please make an appointment

with your practice nurse or GP to have your urine tested. If you have urinary tract infection, you may need some antibiotics.

Your symptoms may take 7 to 14 days to respond to the injections. Your symptoms may get worse before they get better. The effects of the injections generally last between 9 and 12 months. You may need to have repeat injections when the effects of the Botox have worn off, if you feel that it has helped you.

Who can I contact for further information or advice?

The Princess Royal Hospital

The Urology Nursing Team

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Urology consultants

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