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Retrograde urethral sphincterometry

Understanding NICE guidance –
information for people considering
the procedure, and for the public



Ordering information

You can download the following documents from www.nice.org.uk/IPG167

- this booklet
- the full guidance on this procedure.

For printed copies of the full guidance or information for the public, phone the NHS Response Line on 0870 1555 455 and quote:

- N1018 (full guidance)
- N1019 (information for the public).

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About this information

The National Institute for Health and Clinical Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health. One of NICE's roles is to produce guidance (recommendations) on whether interventional procedures are safe enough and work well enough to be used routinely in the NHS in England, Wales and Scotland.

This information describes the guidance that NICE has issued on a procedure called retrograde urethral sphincterometry (RUS) to help diagnose stress urinary incontinence in women. It is not a complete description of what is involved in the procedure – the woman's healthcare team should describe it in detail.

NICE has looked at whether RUS is safe enough and works well enough for it to be used routinely in women who have symptoms of stress urinary incontinence.

To produce this guidance, NICE has:

- looked at the results of studies on the safety of RUS and how well it works
- asked experts for their opinions
- asked the views of the organisations that speak for the healthcare professionals and the women and carers who will be affected by this guidance.

This guidance is part of NICE's work on 'interventional procedures' (see 'Further information' on page 10).

About the procedure

Stress urinary incontinence describes the leaking of urine that can occur during exercise, coughing, sneezing or laughing. It usually happens because the muscles and tissues that make up the pelvic floor have become weakened or damaged. The pelvic floor acts as a support for the bladder, helping to keep it closed until the woman wants to pass urine. A ring of muscle (called a sphincter) keeps the exit from the bladder into the urethra (the tube that carries urine from the bladder out of the body) closed. Stress urinary incontinence can also occur if this sphincter becomes weak.

A doctor will diagnose stress urinary incontinence by considering a woman's symptoms and performing an examination. To help with the diagnosis, the doctor may also want to assess how well the urethra is working. RUS is a new test to do this.

A small cone-shaped device is inserted about 5 millimetres into the urethra. Fluid is passed through the device into the urethra until the pressure of the fluid makes the sphincter from the urethra into the bladder open. The device measures the pressure that is needed to make the sphincter open. A urethra that is working well will need a higher pressure to open the sphincter.

How well the procedure works

What the studies said

Two early studies using RUS showed that the pressure needed to open the urethra was lower in women with stress urinary incontinence than in women who did not have any symptoms of stress urinary incontinence.

In women who had stress urinary incontinence, the pressure values were lower in women with more severe symptoms.

What the experts said

The experts said that there is not yet enough evidence to show whether or not RUS is a useful and reliable way of helping diagnose stress urinary incontinence.

Risks and possible problems with the procedure

What the studies said

In a study of 258 women with symptoms of stress urinary incontinence, five women experienced pain, and four women experienced pain during urination. These were the most common problems.

In another study of 61 women who did not have stress urinary incontinence, one or two women had problems, discomfort or pain with urination.

What the experts said

The experts said that mild discomfort and urinary tract infection are the problems most likely to be associated with the procedure.

What has NICE decided?

NICE has said that there are no major safety concerns with the procedure. However, there is not yet enough evidence to decide whether RUS is useful in the diagnosis of stress urinary incontinence. Until more information is available, RUS should only be used in good quality research studies.

What the decision means for you

NICE has decided that RUS should only be offered as part of a research study. You may be asked if you would like to take part in a research study. If you agree to take part, the details about you and your treatment will be held confidentially and will not include your name. The information will be used only to see how safe the procedure is and how well it works.

Further information

You have the right to be fully informed and to share in decision-making about the treatment you receive. You may want to discuss this guidance with the doctors and nurses looking after you.

The NICE website (www.nice.org.uk) has further information about NICE, the Interventional Procedures Programme and the full guidance on RUS that has been issued to the NHS. The evidence that NICE considered in developing this guidance is also available from the NICE website.

If you have access to the internet, you can find more information on stress urinary incontinence on the NHS Direct website (www.nhsdirect.nhs.uk).

You can also phone NHS Direct on 0845 46 47.

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