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Biofeedback Use In Urinary Continence With Primary Epispadias

Objective
The study aimed to investigate the continence outcome in primary epispadias patients treated at a tertiary center. The authors hypothesized that additional continence procedures following primary epispadias repair is not routinely needed.

Results
Most children with primary epispadias can achieve social urinary continence spontaneously or with the support of pelvic floor muscle (PFM) **biofeedback** therapy. Other continence procedures should be reserved for patients who do not attain satisfactory continence. The researchers ascertained that bladder neck surgery is not routinely needed to achieve urinary continence in patients with primary epispadias.

Participants and Researchers
Thirty-three patients (29 males) were included. Twelve had penopubic epispadias, 13 glanular/penile, four duplicated urethra, four females. Median age at repair was two years and follow-up at age eight.

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Methods
The patients were offered an average of three 30-minute nurse-led **biofeedback** sessions. The patients were then given the opportunity to take a **biofeedback** device, the **NeuroTrac MyoPlus Pro** (Verity Medical), home and advised to practice every day for 20 minutes for eight to12 weeks.

After four to six weeks of PFM training practiced without the machine at home, the patient was reassessed to check there was no deterioration in engagement.

Biofeedback is a technique used to help children gain awareness and voluntary control of PFM/sphincter action. It aims to strengthen the PFM and become competent in any toileting situation.

The abstract can be found at
https://www.sciencedirect.com/science/article/abs/pii/S0022346823007583