SACRAL NEUROMODULATION: REPROGRAMMING **CONFIGURATIONS IS** A KEY COMPONENT **IN OPTIMIZING TREATMENT EFFICACY**

FINE-TUNING BLADDER HEALTH IN SACRAL NEUROMODULATION: THE ROLE OF DEVICE REPROGRAMMING IN TREATMENT OUTCOMES

Jin Ye A¹, Fernandes M¹, Castilho M¹, Abadesso Lopes F¹, Garcia R¹, Palma Reis J¹, Pereira e Silva R¹

¹Serviço de Urologia, Unidade Local de Saúde Santa Maria – Lisboa, Portugal

www.ics-eus.org/2025/abstract/681

BACKGROUND

SNM is effective for overactive bladder, chronic non-obstructive urinary retention, and chronic pelvic pain

Many patients need device reprogramming to optimize outcomes

Aim: to assess how often reprogramming is needed and measure its outcomes

METHODS

Prospective cohort (2018-2025) 55 patients with adequate follow-up (mean age 48, 66% female)

Data collected included indication, device type, settings and reprogramming events

Patient satisfaction after reprogramming was assessed using a 5-point Likert scale

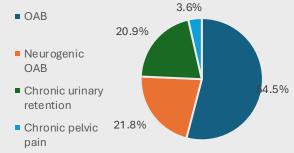
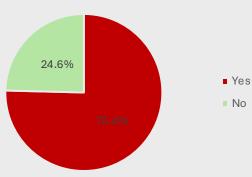


Fig1. Indications for SNM

RESULTS

Fig2. Need for reprogramming



The most frequent change was electrode configuration (53.7%)

No association was found between indication and need for settings change Indication influenced adjustment frequency, though post-hoc analysis did not confirm this

Median satisfaction score was 3 17% (all OAB) reported no improvement

INTERPRETATION

Most benefit from reprogramming, with electrode configuration being a key parameter

Tailored strategies improve outcomes

OAB patients often need more adjustments and may be unresponsive