Patients assessment of satisfaction with magnetic stimulation treatment for urinary incontinence or chronic pelvic pain

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Introduction

After starting with magnetic stimulation as a new therapy for pelvic floor disorders, patients satisfaction with the procedure was assessed as a marker of treatment success.

Materials and Methods

Between June 2014 and September 2015 magnetic stimulation therapy was offered to 97 patients. 61 agreed to the treatment and 56 (21 women, 35 men) have finished it and are included in this retrospective analysis. Treatment was done twice a week using a device regularly bought from Iskra Medical, Slovenia. Treatment sessions were stopped in case of no improvement after 6 sessions and in case of improvement when patients met satisfaction or at least after 18 sessions. After the treatment patients were asked to judge the treatment according to the school grade system.

1 = treatment has outperformed the expectations,
2 = treatment has met the expectations,
3 = treatment has led to a satisfying result,
4 = treatment has led to a slight improvement,
5 = treatment had no positive impact

Results

Indication for treatment was urge incontinence in 11 cases, stress incontinence in 18, mixed incontinence in 6, double incontinence in 2 and chronic pelvic pain in 19 patients. The number of sessions per patient was between 5 and 18 (mean 9.4). The patients assessment of satisfaction was on average 2.4. 15 patients (27%) stated that the treatment outperformed their expectations, 4 showed no improvement (7%). One patient got worse. The average number of treatment sessions was 12.1 in stress incontinence, 5.8 in urge incontinence, 8.2 in mixed incontinence, 18 in double incontinence and 4.6 in patients with chronic pelvic pain. The average patient satisfaction was 2.2 in case of urge incontinence and 2.3 in stress incontinence. It was 3 in double incontinence, 3.3 in mixed incontinence, and 1.8 in patients with chronic pelvic pain.

Conclusions

Magnetic stimulation therapy is an effective treatment with high patient satisfaction. The number of necessary treatment sessions differs significantly depending on diagnosis. Treatment success is fastest in chronic pelvic pain and urge, whereas double incontinence and mixed incontinence need significantly more sessions.

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