

MP48-09 EXPERIENCE WITH SARS (SACRAL ANTERIOR ROOT STIMULATOR) IN SUPRASACRAL SPINAL CORD INJURY PATIENTS: LESSONS LEARNED

*Laura G. Velarde, Reynaldo G. Gómez, Rodrigo A. Campos
Hospital del Trabajador, Santiago de Chile, Chile*



INTRODUCTION AND OBJECTIVE

- SARS is an implantable electronic device to provide voluntary control of micturition, defecation and erectile function in suprasacral spinal cord injury (SSCI) patients.
- We analyze our experience to improve our patient selection criteria

METHODS

- 16 SSCI patients between January 2013 to october 2019
- 8 quadriplegics, 8 paraplegics
- Mean follow-up 60 months (range 6-87)
- Primary endpoint: Continent / urinary tract infection-free, voluntary bladder control
- Secondary endpoints: Assistance with bowel and erectile functions

RESULTS

- Bladder function:
 - 2 failures (12.5%): low compliance bladder and painful stimulation: both diverted
 - All 14 pts. voluntary and continent voiding with SARS
 - 6/14 (43%) symptomatic UTIs (all quadriplegics, poor caregiver technique)
- Defecation function: 15/16 (94%) positive aid for bowel evacuation
- Erection (13 males): 11/13 (85%) stimulated erections, only 33% useful for intercourse
- Long-term problem: 10/14 (71%) damage of the external hardware, related to operator misuse (mostly poorly-trained quadriplegic caregiver)

CONCLUSIONS

- Success: 88 % for micturition, 94% for defecation, 33% for intercourse
- Best candidate:
 - Independent paraplegic female
 - Independent paraplegic male (not concerned with loss of reflex erections)
 - Quadriplegics only if having reliable capable caregivers