**Mitrofanoff**

A mitrofanoff is a catheterisable channel created between the skin and urinary bladder usually from the appendix or a piece of bowel. A valve is created by the surgeon which squeezes shut when the bladder fills with urine. Urine can be emptied from the bladder by passing a catheter through the mitrofanoff into the bladder. Once the bladder is empty the catheter can be removed and discarded.

**Sacral Nerve Stimulation**

Sacral neuromodulation uses a small surgically implanted medical device (like a pace-maker for the bladder) to send mild electrical pulses to nerves that control your bladder. It helps to restore normal nerve activity so that you can pass urine normally.

For further information on all these interventions contact Bladder Health UK to receive comprehensive factsheets.

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www.bladderhealthuk.org  
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10 Tips for Living Positively with Fowlers

1. Don’t be scared to learn to self-catheterise – it isn’t as difficult as you think!
2. Don’t forget to keep drinking – reducing your fluid intake won’t help!
3. Be kind to yourself – there will be lots of ups and downs but you’ll be OK!
4. Take a break when you’re in pain and rest. Treat yourself to a nice hot water bottle for rough days!
5. If you are recently diagnosed with Fowler’s Syndrome, don’t be disheartened if there is not immediate fix. Different treatments suit different people and you may need to try a few to find the one that is right for you.
6. Be your biggest advocate! It’s difficult when doctors don’t know what you have and sometimes you have to push for help or options!
7. It is likely your GP has never treated anyone with Fowler’s Syndrome before. Encourage them to find out more about the condition via the Bladder Health UK website.
8. It’s OK to grieve for the life that you thought you were going to have but remember Fowler’s doesn’t change who you are or your worth! You’ll learn in time that you are stronger than you ever thought possible.
9. Record consultant appointment or take a friend or family member with you because it’s easy to forget the details of what you discussed. Make a list of questions and ask about treatment options.
10. Build a group of ‘bladder friends’ on social media! There is such value in being able to discuss the ups and downs with others who are also suffering and really understand what you are going through.

For further information on all these interventions contact Bladder Health UK to receive comprehensive factsheets.
Who Are Bladder Health UK?

Bladder illness is a subject that few people talk about but research indicates that four million people in the UK have some form of bladder illness. Bladder Health UK provides much needed support and advice for patients. The charity is active on behalf of sufferers working with healthcare practitioners, government and funding research into the causes and treatments of bladder illness.

What Is Fowler’s Syndrome

Fowlers Syndrome is a condition which was first described in 1985 by Professor Clare Fowler and colleagues. It is a cause of urinary retention (inability to pass water normally) in young women. Prior to that urinary retention in young women was said to be “psychogenic” or due to hysteria. So the description of a real abnormality affecting the muscle of the urethral sphincter was a significant step forward.

Key Features

The key features of the condition are that it is only found in women, usually young, with a peak age of onset of 27 years. Professor Fowler suggests that all efforts should be made be made by the patient’s urologist and neurologist to exclude other possible conditions by appropriate investigations, including ideally a cystoscopy and an MRI of the brain and spinal cord. A history of bladder or kidney problems going back to childhood is against the diagnosis—that is more likely to indicate a congenital abnormality of the muscle or structure of the urinary system.

Some patients are able to pass urine with difficulty but retain significant amounts afterwards. Some suffer complete retention and are not able to pass water at all.

Frequent urinary infections in sufferers may give rise to back pain, supra-pubic pain and pain passing urine.

Causes

The cause of Fowlers Syndrome is as yet unknown but a high proportion of sufferers have the associated condition of polycystic ovaries - a benign condition of unknown cause where multiple cysts are seen on ultrasound of the ovaries and the women experience irregular periods and have had hirsutism (facial hair) and acne.

There is no neurological disorder associated with the condition and a hormonal basis for underlying sphincter abnormality seems likely.

Interventions

Treatments for Fowlers Syndrome are still being researched. There are various interventions which can help sufferers.

Clean Intermittent Self-Catheterisation

For patients who can void almost normally, residual volumes of urine are monitored. As long as they remain low, no intervention is required. Those with large residual volumes giving rise to urinary tract infection and large bladder, are taught clean intermittent self-catheterisation.

During the process of clean intermittent self-catheterisation, a catheter (a small hollow tube) is passed into the bladder via the urethra so that urine is allowed to drain. Once the bladder is empty the catheter can be removed. The same process can be repeated several times a day if necessary.

Supra-Pubic Catheter

A supra-pubic catheter is a type of in-dwelling catheter that is inserted into the bladder through an incision a few inches below the navel. The procedure to insert the catheter is usually performed under general anaesthetic. Urine then drains into a leg bag which can be emptied at various times during the day when it becomes full.

Sufferers requiring an in-dwelling catheter generally find this a more comfortable solution than a urethral catheter. It can also lessen the risk of urinary tract infection.