Sacral Nerve Stimulation (SNS)
Discharge Information Following a Temporary Implant

Temporary Sacral Nerve Stimulation

Your temporary Sacral Nerve Stimulation (SNS) lead has been implanted under Xray guidance in theatre, and we have switched the stimulation on prior to you being discharged. You have a small white external stimulator in a belt around your waist and a separate hand controller which you can use to switch the stimulation on or off and to increase or decrease the level of stimulation.

You have received instruction on how to use these devices in addition to written information. During the trial period, which is usually for 2 weeks, please keep the SNS switched on at all times. The only exception to this is when driving – the manufacturer's recommendation is that you switch it off before driving, and switch on again afterwards. Some people need to turn it up higher if the feeling disappears others may stay on the same setting. If the setting is too high, it can be reduced.

Two new AAAA batteries are in the white external stimulator, and you have been given spares in case you should find that they run down, although this is rare. You can check the battery status via your hand controller. You have been given a charger for the hand controller as well as instruction about how to use it. You will need to ensure that the hand controller is kept charged.

Turn up the setting on the hand controller screen so that you can only just feel it. Once you have this feeling, it is working. Don't be guided by the numbers on the screen, be guided by what you feel - it will not work any better if you turn it up higher and could cause nerve irritation.

Pain medication

Your lower back area will be tender for a few days, and this should then settle down. You may wish to take some simple pain relief.

Dressing

Do not remove your dressing!

This dressing is there to secure the wire inserted in your lower back. If the dressing starts to peel away, put another dressing over the top. You may experience some itching towards the end of the trial from the dressing; this is also normal but do not remove it. If you have excessive irritation, please call the number provided on this leaflet.

Bowel diary

Complete the bowel diary carefully during the trial period. Note on the diary any bowel medication during this time. Please bring the diary with you when you come back to have your wire removed. This will tell us how well the temporary procedure has worked.

Washing

The dressing and wires must not get wet. You must keep your wound dry whilst the temporary wire is in place so do not wet your lower back area. You may wash your hair over a basin. After the temporary wire is removed you will be able to return to your normal shower/bath routine.

Physical activity and exercise

The temporary wire is only held in place by the dressing. If your work involves any heavy lifting, operating heavy machinery, or excessive bending or stretching, we advise you to take some time off work following your procedure. Avoid strenuous exercise, sexual activity or heavy lifting while the temporary wire is in place. It is also advisable to switch it off whilst driving or operating heavy machinery.

Driving

It is recommended that you switch the stimulation off when driving, switching it back on when you reach your destination.

Top tips

Always keep the white external neurostimulator in the belt around your waist including bedtime. Placing the wire inside your pyjama trousers or pants at night will help to keep it more secure and reduce the risk of pulling on the wire.

If your wound becomes inflamed, tender, painful or if there is any discharge, contact us immediately on the telephone numbers provided. If you experience pain or are worried you may have dislodged the wire, switch off the SNS and call your health professional when convenient.

Removal of the wire

Your wire will be removed by your health professional at your follow up Outpatient Appointment in 2 weeks' time. No anaesthetic is necessary and it takes only a few seconds to withdraw the wire. If necessary, a small plaster may be placed over the wound which can be removed after a few hours. You will then be able to return to normal life including bathing.

If your bowel diary shows you have had a good response and wish to proceed, we will discuss the outcome of your temporary SNS at our Pelvic Floor Multidisciplinary Team Meeting. If you have had a good response, you will be placed on the waiting list for a permanent SNS. Your consultant may also wish to review you either face to face or via a telephone consultation. We will keep you informed.

Contacting us:

Good Hope / Heartlands and Solihull Hospital Patients

Clare Horrobin – Colorectal Nurse Specialist - GI Physiology
Direct line: 0121 424 7427 (24hr answerphone)

Queen Elizabeth Hospital Patients

Functional Bowel Secretary: Carolyn Corbett
0121 371 4501

Function Bowel CNS Team – Pelvic Floor
Lillie Bennett / Emily Coyle
Direct Line: 0121 371 4501

All patients

Weekends/Evenings and All Urgent Advice
Surgical Assessment Unit – Birmingham Heartlands Hospital
0121 424 2763

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