



AXONICS PROCEDURE INFORMATION

What is Axonics?

Axonics Therapy is indicated for patients who have failed conservative treatments, such as lifestyle changes, physical therapy, or medications. It is approved treatment for patients suffering with:

- Overactive bladder (OAB) – the urgent need to urinate which may result in frequent urination and/or incontinence (leakage) episodes
- Urinary frequency – the need to urinate 8 or more times a day, which may or may not be associated with urgency
- Urinary urgency incontinence (UUI) – the urgent need to urinate or trouble holding urine before making it to the restroom
- Fecal (bowel) incontinence – involuntary loss of stool which may or may not be associated with urgency
- Nonobstructive urinary retention (UR) – the inability to completely empty the bladder which may result in trouble urinating or frequent small voids.

Axonics therapy works by stimulating the sacral nerves with tiny electrical pulses. Axonics therapy works to better regulate the sacral nerve function. These nerves can then interpret signals from the brain and pass them on to the surrounding pelvic floor muscles, which restores normal bladder and bowel function.

The goal is to restore the normal functioning of the sacral nerves and reduce the improper signaling that can cause leaks, the sudden urge to go, or going too often. The symptoms of an overactive bladder or bowel incontinence are effectively eliminated by the stimulation from the Axonics device. Axonics is an option for patients who have not responded to more conservative treatments such as changes to diet, medication and physical therapy.

Axonics therapy uses a miniature implant to provide gentle stimulation to the nerves that control the bladder and bowel. This can help restore normal communication between the brain and the bladder and bowel, which can result in an improvement of your symptoms.

Axonics Trial Period / Device Implantation

Axonics therapy trial is an external version of the device to determine if the treatment is likely to be effective for a patient. This may be done in the office or surgical center setting. The trial typically lasts one to two weeks. If the trial produces positive results, the patient may elect to proceed with the permanent device placement. The device is implanted in the surgical setting as a same day procedure.

How long does it take to recover from surgery?

Refrain from any strenuous physical activity two to three weeks post procedure.

PRIOR TO PROCEDURE:

You will be scheduled for an appointment two weeks prior to the procedure.

Please fill all prescriptions that we give you and read the instructions on the bottle. These prescriptions will have been given to you at your preoperative appointment or when we call prior to your procedure.

If your procedure is canceled or must be rescheduled we will notify you as soon as possible and discuss potential dates for rescheduling surgery.

You must notify your provider if you are taking any **SGLT2 inhibitors** such as

- Brenzavvy (bexaglifloxin)
- Inovokana (canagliflozin)
- Farziga (dapagliflozin)
- Jardiance (empagliflozin)
- Steglatro (ertugliflozin)

OR any **GLP-1 receptor agonists** such as

- Ozempic (semaglutide subcutaneous)
- Trulicity (dulaglutide)
- Bytetta (exenatide)
- Bydureon Bcise
- Victoza (liraglutide)
- Adlyxin (lixisenatide)

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If you take any **blood thinners** on the following list, this will need to be discussed with your provider. Do not stop these medications on your own. According to the schedule below, unless otherwise noted by your cardiologist or Dr. Trotter/Dr. McClintock.

- o Plavix (Clopidrogel)
- o Pradaxa (Dabigatran)
- o Xarelto (Rivaroxaban)
- o Elquis (Aphixaban)
- o Effient (Prasugel)
- o Brillinta (Ticagrelor)
- o Aspirin or Baby Aspirin
- o Fish Oil
- o Meloxicam

Medications Prescribed For Your Procedure: Please read the instructions below and ON THE MEDICATION BOTTLES for when, why and how to take them.

1. Keflex (cephalexin), Bactrim (trimethoprim /sulfamethoxazole) or Doxycycline. These are antibiotics. You are to start the antibiotic the day before the procedure and complete the course as prescribed. It may cause GI upset.

Important Contact Information

Midtown Urology
911 W. 38th Street, Suite 200
(512) 451-7935 phone
(512) 451-7965 fax

If you need to reach the doctor after hours for an urgent matter, please call our office at 512-451-7935 and follow the prompts to be connected with the on-call provider.

You may also go to Seton Main Emergency Room on 38th and N. Lamar. Please only go to this hospital as our physicians have privileges there.

Hospital for Emergencies

Seton Main Medical Center
1201 W 38th St, Austin, TX 78705