

QUESTION

Should intermittent catheterisation vs. indwelling catheter be used for patients in urinary retention with Friedreich ataxia?

POPULATION:	patients in urinary retention with Friedreich ataxia
INTERVENTION:	intermittent catheterisation
COMPARISON:	indwelling catheter
MAIN OUTCOMES:	Type of catheter;

ASSESSMENT

Problem

Is the problem a priority?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<ul style="list-style-type: none"> <input type="radio"/> No <input type="radio"/> Probably no <input type="radio"/> Probably yes <input checked="" type="radio"/> Yes <input type="radio"/> Varies <input type="radio"/> Don't know 	<p>Elevated post-void residual was found in 39% of a small cohort (n=28) of people with FRDA (Musegante et al, 2013).</p>	<p>Clinical experience indicates individuals with FRDA may experience urinary retention and require intervention. In case of recurrent or ongoing retention, intermittent catheterization may be difficult due to concurrent upper limb dysfunction. However, individuals with FRDA may struggle with post in-dwelling catheter (IDC) trial of void due to neurogenic bladder issues. These issues need to be considered on a case by case basis in clinical management. Post voiding bladder scan would be helpful in establishing residual volume and deciding how best to manage the problem.</p>

Desirable Effects

How substantial are the desirable anticipated effects?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<ul style="list-style-type: none"> <input type="radio"/> Trivial <input type="radio"/> Small <input checked="" type="radio"/> Moderate <input type="radio"/> Large <input type="radio"/> Varies <input type="radio"/> Don't know 	<p>A search of four databases (CENTRAL, MEDLINE, EMBASE, CINAHL) identified no randomized, non-randomized controlled, cohort and case studies published from 2014 through to 13 July 2020. No further published evidence meeting the search criteria was identified in the Consensus Clinical Management Guidelines for Friedreich's ataxia, 2014.</p>	<p>Prevention of recurrent UTIs and permanent kidney scarring as a result.</p>

Undesirable Effects

How substantial are the undesirable anticipated effects?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS

<ul style="list-style-type: none"> ● Large ○ Moderate ○ Small ○ Trivial ○ Varies ○ Don't know 	<p>A search of four databases (CENTRAL, MEDLINE, EMBASE, CINAHL) identified no randomized, non-randomized controlled, cohort and case studies published from 2014 through to 13 July 2020. No further published evidence meeting the search criteria was identified in the Consensus Clinical Management Guidelines for Friedreich's ataxia, 2014.</p>	<p>Potential complications of failed catheterization complicated by urethral damage are significant.</p>
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Certainty of evidence

What is the overall certainty of the evidence of effects?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<ul style="list-style-type: none"> ○ Very low ○ Low ○ Moderate ○ High ● No included studies 	<p>No published evidence.</p>	

Values

Is there important uncertainty about or variability in how much people value the main outcomes?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS						
<ul style="list-style-type: none"> ○ Important uncertainty or variability ○ Possibly important uncertainty or variability ● Probably no important uncertainty or variability ○ No important uncertainty or variability 	<table border="1" data-bbox="518 1138 1417 1295"> <thead> <tr> <th data-bbox="518 1138 926 1222">Outcomes</th> <th data-bbox="932 1138 1108 1222">Importance</th> <th data-bbox="1115 1138 1417 1222">Certainty of the evidence (GRADE)</th> </tr> </thead> <tbody> <tr> <td data-bbox="518 1227 926 1295">Type of catheter - not measured</td> <td data-bbox="932 1227 1108 1295">IMPORTANT^a</td> <td data-bbox="1115 1227 1417 1295">-</td> </tr> </tbody> </table> <p data-bbox="562 1333 1199 1360">a. Identified as important by expert authors on this topic</p>	Outcomes	Importance	Certainty of the evidence (GRADE)	Type of catheter - not measured	IMPORTANT ^a	-	
Outcomes	Importance	Certainty of the evidence (GRADE)						
Type of catheter - not measured	IMPORTANT ^a	-						

Balance of effects

Does the balance between desirable and undesirable effects favor the intervention or the comparison?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<ul style="list-style-type: none"> <input type="radio"/> Favors the comparison <input type="radio"/> Probably favors the comparison <input type="radio"/> Does not favor either the intervention or the comparison <input checked="" type="radio"/> Probably favors the intervention <input type="radio"/> Favors the intervention <input type="radio"/> Varies <input type="radio"/> Don't know 	No published evidence.	

Acceptability

Is the intervention acceptable to key stakeholders?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<ul style="list-style-type: none"> <input type="radio"/> No <input type="radio"/> Probably no <input checked="" type="radio"/> Probably yes <input type="radio"/> Yes <input type="radio"/> Varies <input type="radio"/> Don't know 	No published evidence.	

SUMMARY OF JUDGEMENTS

PROBLEM	JUDGEMENT						
	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
VALUES	Important uncertainty or variability	Possibly important uncertainty or variability	Probably no important uncertainty or variability	No important uncertainty or variability			
BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the	Probably favors the intervention	Favors the intervention	Varies	Don't know

JUDGEMENT							
			comparison				
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know

TYPE OF RECOMMENDATION

Strong recommendation against the intervention ○	Conditional recommendation against the intervention ○	Conditional recommendation for either the intervention or the comparison ○	Conditional recommendation for the intervention ●	Strong recommendation for the intervention ○
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CONCLUSIONS

Recommendation

We conditionally recommend individuals with Friedreich ataxia in urinary retention undergo intermittent catheterization prior to insertion of an indwelling catheter, with suitability for catheterization dependent on their neurological abilities.

Justification

Clinical experience indicates that individuals with FRDA can go into urinary retention and require intervention. However, in the case of recurrent or ongoing retention, intermittent catheterization may be difficult due to concurrent upper limb dysfunction. Furthermore, individuals with FRDA may struggle with post-indwelling catheter trial of void due to neurogenic LUT dysfunction. These issues need to be considered on case by case basis in clinical management.

Subgroup considerations

This recommendation is for individuals with Friedreich ataxia in urinary retention. An assessment of suitability for catheterization based on neurological abilities may be required.

Research priorities

Clinical audit of outcomes of intermittent catheterization vs indwelling catheter in individuals with FRDA and urinary retention. Review of capacity of individuals with FRDA to self-catheterize.

References

Musegante A, Almeda P, Monteiro R, Bassoro U. Urinary symptoms and urodynamics findings in patients with Friedreich's ataxia. *International Brazilian Journal of Urology*. 2013;39(6):867-74.