

Appendix 1

Local Anaesthesia (LA) Guidance for SIMS RCT

Pre-operative Analgesia:

All participants, in both arms, should receive within 30-60 minutes of the operation:

- Paracetamol Oral/PR 1gm and NSAID (Diclofenac Sodium -100mg or Ibuprofen 400mg – Oral/ PR) and,
- Oral opiate analgesia (Oral morphine 10-20 mg or MST Continus 10-30mg) if not contra-indicated; (the lower doses are to be used in women \geq 65 years) and,
- EMLA cream applied vaginally to the sub-urethral area by the patient/ nurse (a 5% emulsion preparation, containing 2.5% each of lidocaine/prilocaine)
- Optional:
 - Instillagel 5ml intra-urethral by the nurse (anaesthetic, lubricant).
 - For anxious patients: oral anxiolytic (Temazepam 10-20 mg) can be given if not contra-indicated (if so please consider omitting the opiate analgesia).
 - Consider oral /IM anti-emetics in women receiving opiate analgesia

Local Anaesthesia:

- Fast-acting LA: Infiltrate 4-5 mls of Lignocaine 1% with adrenaline 1:200,000 (max dose 3.5mg/kg bodyweight) into the peri-urethral area at site of future application of instruments (using orange needle 25G). This is fast acting LA, in-addition to the EMLA cream, will allow you to apply instruments to the peri-urethral area.

- Long-acting LA: Infiltrate \pm 40mls of Levo-Bupivacaine 2.5mg/ml (Chirocaine - max dose 1.5 mg/kg bodyweight) OR, Bupivacaine 0.25% with adrenaline 1:200,000 (Carbostesin - max dose 2 mg/kg bodyweight) into:

- a) the vaginal angles (using green needle 21G) until the bilateral vaginal sulci are obliterated (5 mls on each side)
 - b) the obturator membrane and muscles (using curved black spinal needle 22G to hook behind the inferior pubic ramus; 10 mls on each side).
- Once the para-urethral tunnels are dissected up-to the obturator membranes, further infiltration (using Pudendal block or Spinal needle), into the exact site of insertion of the SIMS anchor is recommended using fast acting LA (5mls) and followed by long-acting LA (5mls) on each side.
- ❖ Patients should accompanied by a dedicated nurse during the operation for support.
 - ❖ All doses should to be tailored to patients' medical condition and weight.
 - ❖ We recommend you adhere to this guidance however deviation in the way of infiltration or the type of LA is accepted provided you keep within the general types and appropriate doses described.