Author Year; Country Score Research Design Sample Size	Methods	Outcome		
Kim et al. 2003 USA PEDro=9 RCT Level 1 N=36	·	<ol> <li>No statistical significance due to small sample sizes.</li> <li>Intravesical RTX administration was well tolerated. This patient group was refractory to all previous oral pharmacologic therapy, yet some patients responded with improvement in bladder capacity and continence function shortly after RTX administration.</li> <li>In some cases, mean cystometric capacity increased up to 500% over baseline.</li> <li>Incontinence episodes decreased by over 50% for the 2 highest doses.</li> <li>No data available on long term effect of RXT on AD.</li> </ol>		

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Author Year; Country Score Research Design Sample Size	Methods	Outcome						
	Kim et al. 2003; Resin	iferatoxin (Various Doses)						
	MCC (0.005μM) (Pre->Post)  MCC (0.025μM) (Pre->Post)  MCC (0.05μM) (Pre->Post)  MCC (0.10μM) (Pre->Post)  MCC (0.2μM) (Pre->Post)  MCC (0.5μM) (Pre->Post)  MCC (1.0μM) (Pre->Post)  MCC (0.005μM) (Pre->Ret)  MCC (0.025μM) (Pre->Ret)  MCC (0.05μM) (Pre->Ret)  MCC (0.10μM) (Pre->Ret)  MCC (0.10μM) (Pre->Ret)  MCC (0.5μM) (Pre->Ret)  MCC (1.0μM) (Pre->Ret*)  *Retention data for 1.0μM from 6 week post-base	0.57 (-0.67,1.80) 0.37 (-0.85,1.58)  0.58 (-0.66,1.81) 0.58 (-0.65,1.82) 0.54 (-0.69,1.77) -0.01 (-1.21,1.19) 0.56 (-0.67,1.79) -0.32 (-1.53,0.89) 0.81 (-0.46,2.07) -0.02 (-1.22,1.18) 0.45 (-0.77,1.67) -0.32 (-1.53,0.89) 0.34 (-0.88,1.55) 0.71 (-0.54,1.96)  -0.5 0 0.5 1 1.5 2  SMD (95%C.I.) Favours Treatment						
Giannantoni et al. 2002 Italy PEDro=6 RCT Level 1 N=23	Population: Refractory detrusor hyperreflexia.  Treatment: Randomized two treatments a) single dose of 2 mM. capsaicin in 30 ml ethanol plus 70 ml 0.9% sodium chloride OR b) 100 mM. resiniferatoxin in 100 ml 0.9% sodium chloride.  Outcome Measures: Urodynamics, frequency of daily catheterizations, incontinence episodes and side effects.  Effect Sizes: Forest plot of stand 95%C.I.) as calculated from pre-times.	<ol> <li>Capsaicin group showed no significant urodynamic or clinical improvements at 30 and 60 days.</li> <li>Resiniferatoxin group demonstrated significant urodynamic improvement at 30 and 60 days.</li> <li>Most patients receiving capsaicin, but none receiving resiniferatoxin developed AD, limb spasms, suprapubic discomfort and hematuria.</li> </ol>						

Author Year; Country Score Research Design Sample Size	Methods			Outcome						
	Giannantoni et al. 2002; Resiniferatoxin vs. Capsaicin (control)									
	Mean uninhibited detrusor contraction threshold (30d) Mean uninhibited detrusor contraction max amplitude (30d) Mean max bladder capacity (30d) Mean max bladder compliance (30d) Mean uninhibited detrusor contraction threshold (60d) Mean uninhibited detrusor contraction max amplitude (60d) Mean max bladder capacity (60d) Mean max bladder compliance (60d)  Effet size calculated for 1) pre-inte to 60 days (60d) post-intervention	2 -1 Favours	Contro		-0.16 (-	0.98,0.66 0 1D (95%)	0.76 (-0 0.5 C.I.)	09,1.62	1.74 (0. 1.91 (0. 1.74 (0. 1.85 (0.	89,2.93) 75,2.73) 85,2.86) 2
Igawa et al. 2003 Japan Pre-post Level 4 N=7	Population: 5 participants with cervical injuries and 2 participants with thoracic injuries.  Treatment: bladder instillation with capsaicin solution under general anesthesia.  Outcome Measures: blood pressure, heart rate, serum catecholamines, blood ethanol concentration.			<ol> <li>Capsaicin attenuated elevated BP secondary to bladder distention (empty or full) post-treatment.</li> <li>In all individuals, episodes of AD become negligible and well tolerated &gt; 3 months.</li> </ol>						