

Transurethral Resection of the Prostate

### What is the Prostate?

The prostate is an essential gland located between the urinary bladder and the urethra, which is inside the penis. It plays a crucial role during the reproductive years. As men age, the prostate naturally enlarges. This enlargement can cause urinary symptoms such as:

- · Frequent urination at night
- Hesitancy during urination
- A stop-start urinary stream
- · Leakage of urine after urination

An enlarged prostate can sometimes lead to urinary obstruction and retention, where a man is unable to urinate and requires emergency intervention to relieve the blockage.

### Why is TURP Performed?

If the above-mentioned urinary symptoms become bothersome and problematic, one treatment option is TURP, which has been a reliable solution for over 100 years.

#### What is TURP?

TURP is considered the gold standard and a surgical procedure performed under anesthesia that involves removing the part of the prostate obstructing your urinary flow.

### No Single Treatment is Suitable for All Men

No single treatment is suitable for all men. All prostates are different. Based on factors such as the size, configuration, and other specific characteristics, your urologist will select the best treatment for you.

## How is the TURP Procedure Performed?

Prior to the procedure, your urologist will perform diagnostic studies, such as an MRI of the prostate or a cystoscopy, to confirm that the prostate is obstructing urinary flow and requires treatment.

TURP is performed by passing an instrument called a resectoscope, which has a light source, a loop of wire, and a camera to guide the procedure. The resectoscope is inserted into the urethra and into the bladder by your skilled urologist. It is one of the earlier minimally invasive procedures used to relieve prostatic obstruction.

The loop of wire is connected to an electric current source, which heats the wire, allowing it to cut away small portions of the prostate tissue. This process is known as "coring" the prostate, and the resected tissue will be sent to pathology for evaluation.

After the appropriate amount of tissue is removed, the bladder is drained for a few days with a Foley catheter inserted through the urethra into the bladder.

### **Anesthesia Requirements**

Either general or spinal anesthesia is used during the procedure, and you should not experience any pain during the operation.

### What is the Recovery Time?

- The Foley catheter is typically left in place for 2 to 4 days (or longer, depending on your medical condition).
- Recovery from anesthesia should take a few hours to a day.
- Most patients can go home the same day, although some may require an overnight stay.
- Postoperative recovery usually takes 3 to 4 weeks, as the prostatic area needs time to heal, especially in the presence of urine.

## **Recovery Guidelines**

- No straining for 2 to 4 weeks, including for bowel movements. A laxative may be recommended to avoid straining.
- Avoid strenuous activities, such as lifting weights over 6 to 8 pounds.
- Refrain from strenuous exercise or sexual intercourse for 2 to 4 weeks.
- If you're taking any anticoagulants or bloodthinning medications, they will be resumed according to your cardiologist's recommendation. However, be aware that the risk of bleeding may increase with these medications.
- High fluid intake is recommended after surgery to prevent urination issues and help eliminate any clots that may form after the catheter is removed.

# Are There Any Risks with TURP?

TURP is generally considered a safe procedure and has been a reliable solution for over 100 years. However, like any surgery, there are potential risks, which should be discussed with your healthcare provider before proceeding.

#### Possible Risks of TURP

- Delayed healing: Depending on individual medical conditions and medications being taken, healing may be delayed.
- Erectile function: TURP has no direct effect on erectile function, but it may impact ejaculation. During orgasm, semen may flow backward into the bladder instead of being expelled through the urethra, and most men will later urinate it out.
- Urinary issues: Some men may experience urinary difficulties after surgery, especially if they have other medical conditions, such as Parkinson's disease, multiple sclerosis, or similar conditions.

## What are the Alternative Treatments to TURP?

- Holmium laser enucleation of the prostate (HoLEP): HoLEP uses a laser fiber attached to a scope that is passed into the prostate and bladder to resect tissue. The tissue is then removed, and your urologist will use a morcellator to fragment and suction out the prostate tissue, which is sent to pathology for analysis.
- Transurethral laser vaporization of the prostate (TULVP): Using a high-powered Holmium or Thulium laser, the prostate tissue is vaporized, similar to TURP, to relieve obstruction.
- Urolift: This involves placing a series of implants on each side of the prostate. These implants push the prostate away from the urethra, improving urination.
- Aquablation: This technique uses a water jet to create a defect in the prostate tissue. The procedure removes only the tissue that is obstructing urinary flow. After Aquablation, a resectoscope is often needed to control any bleeding or residual tissue.

# Additional Minimally Invasive Procedures

- Temporary implantable nitinol device (TIND): TIND is another minimally invasive procedure in which your urologist inserts a wire cone into the prostate to apply pressure, causing incisions that help improve urination. This may provide relief for some patients.
- Rezum: Rezum is a transurethral procedure performed by a trained urologist. A tiny metal tube is inserted into the prostate through the resectoscope, and steam is injected into the prostate. The steam deadens the tissue, which is then absorbed, helping to open up the prostatic urethra for better urinary flow.

## The Prostate Center:



## **More Information:**



One Call Service Center 504 - 988 - 8864



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