Should I have surgery for BPH?

Based on



https://www.healthwise.net/ohridecisionaid/C ontent/StdDocument.aspx?DOCHWID=hw2673 58

Enlarged Prostate: Should I Have Surgery?

You may want to have a say in this decision, or you may simply want to follow your doctor's recommendation. Either way, this information will help you understand what your choices are so that you can talk to your doctor about them.

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Facts Get the fac	Options	Feelings	Decision	Yourself	Summary			

Your options

- Have surgery for your enlarged prostate.
- Don't have surgery.

Surgery can help some men whose symptoms bother them a lot. But other treatments usually are tried first. Watchful waiting or taking medicines are two treatments to consider before surgery.

Key points to remember

- Surgery can help if your enlarged prostate is causing serious problems—such as kidney problems or repeated urinary tract infections—or if medicines haven't helped.
- The most important thing in deciding whether to have surgery is how much the symptoms bother you.
- Surgery works well for most men. But it can cause side effects, including ejaculation problems and erection problems.

What are the treatments for an enlarged prostate?

Home treatment

Home treatment won't stop your prostate from getting larger. But it can help your symptoms. Try these home treatment tips:

- Practice "double voiding." Urinate as much as you can. Then relax for a few moments and try to go again.
- Avoid caffeine and alcohol. They make your body try to get rid of water and can make you urinate more often.
- Try to avoid medicines that can make it hard to urinate. These include over-thecounter antihistamines, decongestants (including nasal sprays), and allergy pills.
 Check with your doctor or pharmacist about your medicines.

Medicine

If home treatment doesn't help, you can take medicine for an enlarged prostate. Medicine can reduce the symptoms, but it rarely gets rid of them. If you stop taking medicine, symptoms return.

Surgery

If your symptoms are very bad, your doctor may suggest surgery to remove part of your prostate. Few men have symptoms or other problems that are this bad.

What kinds of surgery are done for enlarged prostates?

The most common surgery is TURP (transurethral resection of the prostate). A thin tool is inserted up the urethra to remove the section of prostate tissue that is blocking urine flow.

Other types of surgery include:

- Plasma vaporization ("button" procedure), which removes prostate tissue.
- Laser therapies, which remove a portion of the prostate.
- Transurethral incision of the prostate (TUIP). During this procedure, incisions are made in the prostate to reduce pressure on the urethra.
- A less invasive surgery may be an option for some men who have an enlarged prostate. These methods appear to reduce symptoms of an enlarged prostate. But they don't seem to have the side effects that are common with other surgeries, such as erection problems. Examples include:
 - Prostatic urethral lift (such as Urolift). For this surgery, a device is placed to compress the prostate tissue and improve urine flow.
 - Convective radiofrequency (RF) water vapor thermal therapy (such as Rezum).
 During this surgery, hot water vapor is used to destroy prostate tissue and improve urine flow.

There are also some other surgeries. Talk to your doctor about these options.

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How well does surgery work?

The American Urological Association (AUA) symptom index helps you describe how bad your symptoms are. This index can also be used to measure how well various treatments might work for your symptoms. But the most important thing is how much the symptoms bother you.

TURP

Symptoms get better for more than 70 out of 100 men who have this surgery. 1

Men who are very bothered by their symptoms are most likely to notice great improvement. Men who are not very bothered by their symptoms are less likely to notice a big change.

What are the risks and side effects of surgery?

TURP has possible side effects, such as:

- Retrograde ejaculation. This means that semen flows backward into the bladder instead of out through the penis. It isn't harmful, but it can affect your ability to father children.
 - Out of 100 men who have TURP, 25 to 99 have retrograde ejaculation. That means 1 to 75 out of 100 men do not.¹

Erection problems.

- Out of 100 men who have TURP, 3 to 35 report having erection problems. That means 65 to 97 out of 100 men do not.¹
- Incontinence. A small number of men say they are unable to hold back their urine after surgery.
- Out of 100 men who have TURP, about 1 reports not being able to control urine flow. That means about 99 out of 100 men are able to control urine flow.¹
 A few men will need a second operation several years later, because their symptoms return. This can happen for many reasons, such as if:
 - The surgery doesn't remove enough of the prostate.
 - . The prostate continues to enlarge after surgery.
 - · Scar tissue from the surgery blocks the urethra.

Why might your doctor recommend surgery for an enlarged prostate?

Your doctor may recommend surgery if:

- You cannot urinate.
- You have a partial blockage in your <u>urethra</u> that is causing repeated urinary tract infections, bladder stones, or bladder damage.
- You have kidney damage.
- Medicines have not helped.
- You have too many side effects from the medicines.

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Compare your options

Compare

Compare your options

	Have surgery for an enlarged prostate	Keep using medicines to treat your symptoms
What is usually involved?	 You stay in the hospital for 1 or 2 days. You are asleep or numb during the surgery. You avoid strenuous activity and sex for about 6 weeks. 	You take medicine every day.
What are the benefits?	 Surgery usually helps symptoms. The worse your symptoms are, the more improvement you're likely to see. 	Medicine helps symptoms for most men.
What are the risks and side effects?	 Side effects of surgery can include: Retrograde ejaculation. Erection problems. Incontinence. 	 You have to take medicine for life, because symptoms will come back if you stop. Side effects of medicines may include decreased sex drive, trouble getting an erection, tiredness, dizziness, headaches, and a stuffy nose. Some medicines are available in generic forms that may cost less, but medicines can be very expensive.

Personal stories about using surgery for benign prostatic hyperplasia

These stories are based on information gathered from health professionals and consumers. They may be helpful as you make important health decisions.

Over the past year, I've started to feel like my life revolves around the bathroom. I have to go every 2 or 3 hours, and in my line of work, that's a real inconvenience. And then sometimes it takes me 5 or 10. minutes to finish. It's become a real annoyance to me. I tried medicines to relax and shrink my prostate. But I didn't like the side effects, and I don't want to be on medicine for the rest of my life. This surgery sounds like a good option for me. I think I can manage the possible side effects of the surgery a lot better than the symptoms I have now. It makes sense to me to take care of the problem and not just treat the symptoms.

John, age 56

I haven't had a good night's sleep since this whole prostate thing started. I'm up every few hours almost every night. I find that I'm tired a lot during the day because I'm really not sleeping very well. I tried medicines, but they didn't seem to help me. I always had to have an aisle seat on airplanes because I was urinating so often. Every surgery I've ever had before has turned out well, so I'm not especially concerned about this one. In fact, I'm looking forward to finally getting to sleep through the night.

Tom, age 70

I've adapted pretty well to the changes in my urination. Instead of standing there waiting for something to happen, I just have a seat, pick up a magazine, and let nature take its course. Some men might have a problem with that, but I'm retired and I don't find it a bother at all. I don't feel any need to have surgery, because I think I'm managing just fine. Who knows whether the risks of surgery might not be worse than what I'm dealing with now?

Geraldo, age 67

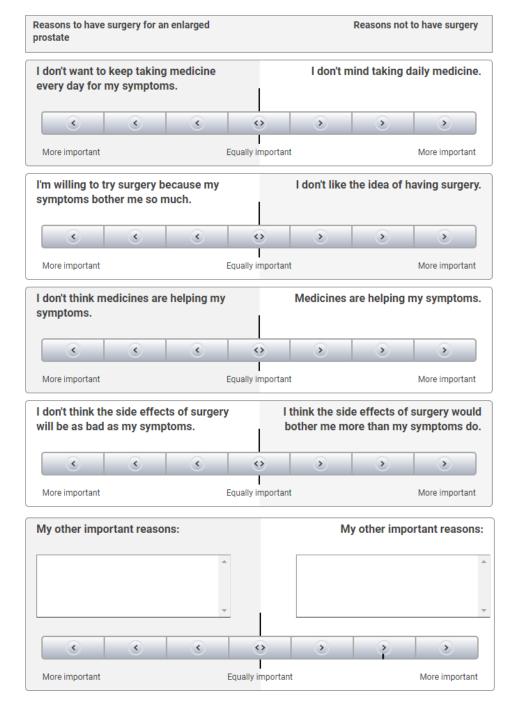
I just remarried after being single for about 15 years, and my new wife and I have a wonderful sex life. No way would I have surgery, no matter how many times I have to get up each night to use the bathroom! I know the risk of erection problems is very small, but it's not a risk I want to take right now.

Dave, age 65



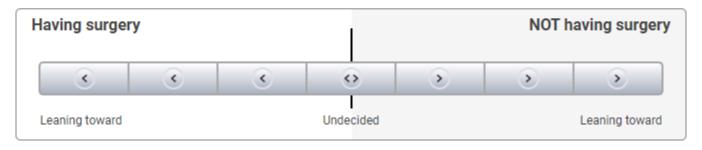
What matters most to you?

Your personal feelings are just as important as the medical facts. Think about what matters most to you in this decision, and show how you feel about the following statements.





Now that you've thought about the facts and your feelings, you may have a general idea of where you stand on this decision. Show which way you are leaning right now.



Enlarged Prostate: Should I Have Surgery?								
Get the Facts	2 Compare Options	Your Feelings	Your Decision	5 Quiz Yourself	6 Your Summary			
What else	e do you nee	d to make y	our decision	1?				
	. Is surgery the best O Yes O No O I'm not sure . Can surgery affect O Yes O No O I'm not sure			tates?				
Dec	cide what's next							
2.	Po you understand to the year about	which benefits and	side effects matter	•				
Cer	tainty							
	1. How sure do you fo	>	your decision? hat sure	> Very	sure			
	Check what you need I'm ready to take and I want to discuss I want to learn mo	action. the options with oth ore about my options	ers. s.					
Us	se the following spac	e to list questions, o	concerns, and next s	steps.	*			

End. (section 6 is simply a summary)