

Transurethral resection of the prostate (TURP)

Urological health

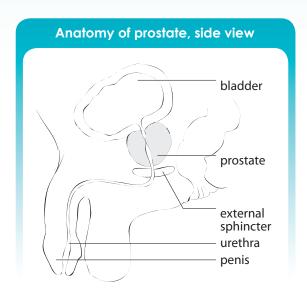
Watch the
Transurethral resection
of the prostate (TURP)
Video

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Transurethral resection of the prostate involves surgery to remove part of an enlarged prostate that is making urinating difficult.

What is the prostate?

- The prostate is a small gland, normally about the size of a chestnut.
- It surrounds a man's urethra (the tube through which urine flows), between the bladder and the muscle that controls urine flow (external sphincter) (See diagram: Anatomy of prostate, side view).



What causes the prostate to get larger?

- As men get older, the prostate often gets larger and squeezes the urethra so that it is harder for you to empty your bladder. This condition is called benign prostatic hyperplasia (enlarged prostate) or BPH.
- You and your urologist will discuss your case and think about all the factors that apply to you. The two of you will decide on the type of prostate surgery that may be best for you and your situation.

What happens during prostate surgery?

 This type of prostate surgery removes parts of the prostate to let your urine flow more freely and your bladder empty more completely. This surgery is a safe and effective treatment for most men.

- A special tool (called a resectoscope) is passed through your penis that contains the urethra (See diagram: Anatomy of prostate, side view) and hollows out the inside of your prostate.
- This process, called trans-urethral resection of the prostate, or TURP, is the most common method used when surgery is necessary.

What should I know before this surgery?

- Your surgery will be done at a hospital and usually, you will be admitted the same day as your operation.
- You will be given information about the time, date, and location of the surgery along with any examinations that you might need.
- You may also meet with your anaesthesiologist who will let you know how to make you most comfortable during surgery (See below: What happens during surgery?).
- You will be asked about medications that you are taking (such as blood thinners, aspirin, arthritis medications or even "natural herbs") because they could possibly increase your risk for bleeding. It may be necessary to stop taking any before surgery. It is important to talk with your doctor if you are not sure about what you are taking.

What occurs during surgery?

- There are two main types of anaesthetic used to prevent pain during the surgery:
 - Spinal anaesthetic ("freezing" you from the waist down with a needle in your back)
 - 2. General anaesthetic (putting you completely to sleep).
- The resectoscope is used to cut away parts of the prostate that are bulging into or blocking the urethra.
- The cut-away pieces are cleared out of the bladder and removed through the urethra.

Transurethral resection of the prostate (TURP)

- No cuts are made to the skin.
- The entire surgery usually takes 1 to 2 hours.
- At the end of the operation, a catheter (plastic drainage tube) is passed through the penis into the bladder to help with emptying urine out of the bladder.
- A watery solution is then used to wash any blood out of the bladder.
- All of the tissue removed at surgery is carefully analyzed to ensure it does not contain cancer.
- This procedure does not increase your risk of developing prostate cancer nor does it cure cancer.

What happens right after surgery?

- You will spend about one to two hours in the Recovery Room until it is safe for you to return to your hospital room.
- You can then eat and drink.
- In some cases, you may go home the same day or you may need to stay in the hospital for one to three days (See: What do I need to know about the catheter?).

What do I need to know about the catheter?

- The catheter usually remains in place for one or two days until the fluid that is leaking out is fairly clear.
- During that time, you may need to continue flushing out the bladder with a watery solution.
- If the catheter feels uncomfortable, the symptoms are usually mild.
- Sometimes there may be cramps in your bladder.
 If this cramping bothers you, medication can often provide relief.
- Once you are told that your bladder is emptying satisfactorily, you will be discharged. This could be one to three days after your operation, as mentioned above.
- Even if some men are sent home with a catheter still in place, it is usually removed within a few days.

What can I expect when the catheter is taken out?

- At the time the catheter is taken out, you may be asked to take a deep breath in and out to relax the muscles in your pelvis. As you breathe out, the doctor will gently pull the catheter out. You may feel temporarily uncomfortable.
- After the catheter is taken out, you may find that you have the following for a while.
 - Sudden and very strong urges to urinate,
 - Discomfort when urinating,
 - Dribbling or leaking urine.
- These symptoms usually disappear in a few weeks when the inflammation clears up and the muscles that control this area become stronger.

What do I need to do when I go home?

For the first 4 weeks, avoid:

Any heavy lifting (over 10 kg or 20 lb.)

Strenuous physical activity (jumping, running, hiking uphill, fast cycling)

Sexual activity

Becoming constipated

Up to 6 weeks after surgery:

You may see blood in your urine

Although it happens less often, you may also pass some small blood clots

To clean out your bladder, you will need to drink large amounts of fluids (water if possible)

Regularly drink about 8 ounces/250 ml every 2 hours (only when awake)

In 6-8 weeks, you should see big improvements in:

The flow of your urine

The way you can empty your bladder

Transurethral resection of the prostate (TURP)

What are the side effects of TURP surgery?

- There is a small risk of infection, which may need to be treated with antibiotics.
- Rarely, there may be bleeding that will require a blood transfusion or you may need to go back for another surgery.
- For most men, there is no change in their ability to have an erection after a TURP.
- Often the amount of semen seems less because of backflow into the bladder at orgasm (called retrograde ejaculation).
- These changes should not affect your sexual enjoyment or that of your partner.

Will I need to have surgery again?

- Sometimes, men can have trouble controlling their urine. This may need medication to treat or more surgery.
- At times, if there is abnormal scarring caused by the surgery or if the prostate gets larger again, you may need more investigations and/or treatment.

Your TURP has been scheduled for:

Day:		
Date:		
Time:		
Location:		
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Notes:		



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