

What You Need to Know About Treatment of Enlarged Prostate

If I have benign prostatic hyperplasia (BPH), will I need to be treated?

Your doctor will help you decide about treatment, depending on your symptoms, how severe those symptoms are, and how much they affect the quality of your life.

If your symptoms are mild, you may not need treatment.

Is there anything I can do to help my symptoms on my own?

You may get some relief by:

- Reducing the amount of caffeine and alcohol you drink
- Drinking less of all types of liquid
- Urinating on a regular schedule, especially before going to bed

If I do need treatment, what can I expect?

BPH can be treated with medicines or surgery. Surgery is less common now that we have medicines that help symptoms.

Doctors prescribe 2 types of medicines for BPH: reductase inhibitors and alpha adrenergic blockers. Sometimes doctors prescribe these medicines together.

What should I know about reductase inhibitors such as Avodart and Proscar?

Reductase inhibitors include Avodart (dutasteride) and Proscar (finasteride). These medicines improve urinary flow by shrinking the size of your prostate gland. It may take up to 6 months before you notice any improvements.

The side effects of these medicines are usually mild but can include trouble getting an erection, loss of interest in sex, or less semen. Less often, these medicines are linked to an increased risk for prostate cancer.

What should I know about alpha adrenergic blockers such as Alfutal, Cardura, Flomax, Hytrin, Rapaflo, UroXatral, and Xatral?

Alpha adrenergic blockers include Alfutal, UroXatral, Xatral (alfuzosin), Cardura (doxazosin), Flomax (tamsulosin), Hytrin (terazosin), and Rapaflo (silodosin). These medicines improve urinary flow by relaxing the part of the prostate surrounding the urethra. These medicines work quickly (within days to weeks) to ease BPH symptoms, such as urgency and the need to urinate at night.

Continued on next page

Side effects are usually mild, but include low blood pressure, dizziness, headache, and tiredness. Men with heart disease may have chest pain.

Why would my doctor recommend surgery?

Your doctor may consider surgery if:

- You can't completely empty your bladder when you urinate
- You can't urinate or can't hold your urine
- You have bladder stones
- You have blood in your urine or kidney damage

What are the different types of surgery for BPH?

Urologists have used the TURP (transurethral resection of the prostate) procedure for decades to treat BPH. Most men need to stay in the hospital for 1 to 2 days after TURP.

Newer procedures include TUMT (transurethral microwave therapy) or TUNA (transurethral needle ablation). Both are less invasive than TURP and generally can be done in a day-surgery facility. None of these procedures prevents prostate cancer. You will need to continue regular prostate cancer screening as advised by your doctor.

What should I know if my doctor recommends TURP?

For TURP, the urologist inserts an instrument into your urethra to remove the part of the prostate that's causing the blockage. Before the surgery, you get general or spinal anesthesia so you won't feel anything.

After TURP, men with severe symptoms nearly always notice a big improvement. It may take up to 6 weeks to see these improvements and for soreness and urinary frequency to subside.

The risks for TURP include problems with sexual performance, incontinence, and risks associated with any surgery.

What should I know if my doctor recommends TUMT?

For TUMT, the urologist inserts an instrument into your urethra to kill parts of your prostate with microwaves. Before the procedure, you get general or spinal anesthesia so you won't feel anything.

As you heal, this part of your prostate shrinks. It may take a few weeks to a few months to notice improvements.

Side effects include urinary retention, infection, and pain after the procedure. About 20% of men have sexual dysfunction after TUMT.

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What should I know if my doctor recommends TUNA?

For TUNA, a urologist uses low-level radiofrequency energy to kill parts of your prostate. The urologist inserts radiofrequency needles through your urethra and into your prostate gland. Before the procedure, you'll take medicines to help you relax and a local gel anesthetic in the urethra so you won't feel anything.

It may take a few weeks before you notice any improvement in your symptoms, and a few months before you see significant improvement.

TUNA has a low rate of sexual side effects and less bleeding than TURP.