

# Transurethral resection of the prostate (TURP)



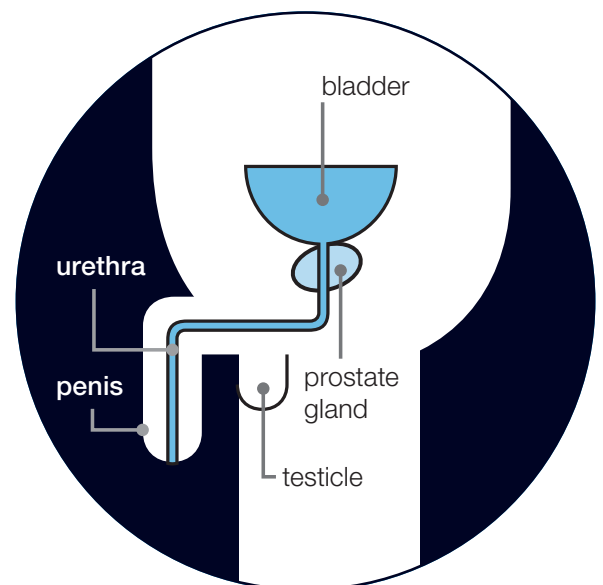
## In this fact sheet:

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This fact sheet is for men who are thinking about having an operation called a transurethral resection of the prostate (TURP) to treat symptoms of an enlarged prostate gland. You may hear this condition called benign prostatic enlargement (BPE) or benign prostatic hyperplasia (BPH). In this fact sheet, we use the term enlarged prostate for both BPE and BPH. Your partner or family might also find this booklet useful to help them understand the condition.

Each hospital will do things slightly differently, so use this fact sheet as a general guide and ask your doctor or specialist nurse for more details about what to expect.

## Where is the prostate gland?



The prostate lies underneath the bladder and surrounds the tube that you pass urine and semen through (urethra).

## How does TURP treat an enlarged prostate?

In some cases, an enlarged prostate can press on the tube through which you pass urine (urethra), causing it to narrow. This can slow down or stop the flow of urine. Transurethral resection of the prostate (TURP) is an operation to remove the parts of the prostate gland that are pressing on the urethra.

It is the most common type of surgery for treating an enlarged prostate.

There are several other treatment options for an enlarged prostate, including lifestyle changes, medicines and different types of surgery. Your doctor or nurse will discuss these options with you to help you decide what is right for you. You can read more about an enlarged prostate and the different treatment



options in our booklet, **Enlarged prostate:**

**A guide to diagnosis and treatment.** You



can also call our Specialist Nurses on our confidential helpline.

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## What are the advantages and disadvantages?

### Advantages

- The operation is widely available across the UK.
- It can improve your flow of urine and the effects of symptoms on your day-to-day life.
- It has a long-lasting effect.
- The prostate tissue that is removed can be checked for signs of cancer, although having an enlarged prostate does not put you at greater risk of getting prostate cancer.
- TURP can be used to treat and remove bladder stones, if present.

### Disadvantages

- You may need to stay in hospital for a few days after the operation.
- At some point you may need another operation. About 7 or 8 out of 100 men (7 or 8 per cent) will need another operation within 4 years.
- Around 3 out of 100 men (3 per cent) need to have a blood transfusion.
- It may take between four and eight weeks to fully recover from a TURP.

- Symptoms may take several weeks to improve.
- After the operation, a thin flexible tube (catheter) will be put through your penis to drain urine from the bladder. A small number of men find that they cannot pass urine at all in the hours after their catheter has been removed. If this happens, you will need a new catheter put in – usually for a few days.

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## What does treatment involve?

### Before the operation

You will have a hospital appointment about two to six weeks before your operation. If you are taking any medicines or herbal remedies, it is useful to bring a list of these with you.

Your doctor or specialist nurse will make sure that the operation is suitable for you and that you are fit enough to have an anaesthetic. They will also explain what the operation involves and answer any questions you may have. You will also be told when you will need to go into hospital for the operation, which could be the day before your operation or on the day of the operation itself.

It is important to tell your doctor or specialist nurse if you are taking medicines that thin your blood, such as aspirin, clopidogrel, warfarin or some herbal remedies. Your doctor or specialist nurse may ask you to stop taking them before the operation. This is because these medicines affect how your blood clots, which can make you lose more blood during the operation, making it more likely that you will need a blood transfusion.

### On the day of the operation

You will see a team of health professionals, which may include a consultant, other doctors and the specialist who is going to give you your anaesthetic (an anaesthetist). They can answer any further questions you may have. The anaesthetist will tell you if you are going to have a spinal anaesthetic so that you do not feel anything below your waist, or a general anaesthetic so that you are asleep throughout the operation. You may

have already been told this, and the anaesthetist will then confirm this on the day of the operation.

Your doctor or nurse will ask you not to eat or drink for six to eight hours before the operation. They will also ask you to wear special stockings that help to prevent blood clots forming in your legs during and after the operation.

### What does the operation involve?

Whilst you are under anaesthetic, the surgeon will pass a thin tube-shaped metal instrument into the urethra through your penis. The tube has a small camera on the end so that the surgeon can get a good view of the prostate. The surgeon passes a small electrically-heated wire loop through the tube and uses it to remove small pieces of prostate tissue. Once the prostate tissue has been removed, any bleeding is stopped and there is a clear passage for the flow of urine.

During the operation, fluid is passed into your bladder to clear away the small pieces of prostate tissue that have been removed. The pieces of prostate tissue are then sent to the laboratory to be checked for any unusual cells that might suggest cancer. The operation takes between 45 minutes and an hour.

#### TUR syndrome

Very occasionally, the fluid that is used to flush your bladder can enter your bloodstream in significant levels and cause breathing problems, sickness and confusion. This is a temporary condition known as TUR syndrome. If you have any of these symptoms after the operation, tell your doctor or nurse straight away. TUR syndrome is rare. It can affect around 1 out of 100 men (1 per cent) who have a TURP. Surgeons are trained to reduce the risk of TUR syndrome – for example, by making sure your operation does not take longer than an hour.

Some recent studies suggest that a new way of performing TURP, called a bipolar TURP, may lower your risk of developing TUR syndrome. Bipolar TURP is only available in some hospitals. Check with your doctor or nurse which kind of procedure is available to you.

### What happens afterwards?

At the end of the operation, the surgeon passes a thin tube (catheter) through your penis into the bladder to allow urine, blood and any loose prostate tissue to pass out of the body.

For the first 12 to 18 hours after the operation, the catheter is used to flush a salt water fluid (saline) through your urethra and into your bladder. You may notice the fluid draining into your catheter bag is pink or red at first but this will start to clear after a while.

After the operation there may be some discomfort but usually no pain. The catheter may cause you to have bladder spasms or to feel the need to urinate. This is because the catheter is held in place by a small balloon at the tip of the catheter (filled with water) which can irritate the very sensitive part of the bladder. There are a number of things that can be done to help, so let your nurse know if you have discomfort. Drinking plenty of fluids (8 pints or 3 litres a day) will ensure a good flow of urine and decrease the possibility of blood clots, which can block the catheter.

When your urine is clearer, usually two to three days after the operation, your nurse will remove your catheter. The catheter slips out quickly and easily once the balloon holding it in is deflated. This should not hurt but might feel uncomfortable. The nurse will check that you are passing urine easily before you go home. Most men notice that their urine flow improves immediately after the operation, though some men may find it uncomfortable to urinate at first. This may be due to the catheter or swelling from the operation.

A small number of men find that they cannot pass urine at all in the hours after their catheter has been removed. If this happens, you will need a new catheter put in for a few days, or sometimes longer. Most men are able to urinate normally once this second catheter has been removed.

Most men stay in hospital for two days after the operation, but you may need to stay longer.

You will have a follow-up appointment a few months after your operation to check on your symptoms.

### Return to normal activities

It may take between four and eight weeks to fully recover from a TURP. You should avoid strenuous activity and heavy lifting for three to four weeks. Constipation is often a problem after TURP and you may need to take medicines to help with this. Your doctor will be able to tell you when you are fit enough to return to work and start driving. You can usually start driving quite soon after the operation. It is a good idea to check with your car insurance company for any specific rules about driving after an operation.

You should wait for about two to three weeks after the operation, or until you feel fully recovered, before you have sex. If you are concerned about this, your doctor or nurse can give you support and information.

### What are the side effects?

Possible side effects of TURP include:

- **Problems passing urine.** At first, you may find that you pass urine more often and sometimes urgently, but this usually improves over time. Speak to your doctor or nurse if you continue to experience this problem.
- **Leaking urine when you cough, sneeze, laugh or exercise.** This is called stress incontinence and happens to around 2 out of 100 men (2 per cent) after a TURP. Your doctor or nurse can give you advice on pelvic floor exercises that may help to improve your bladder control. Read our Tool Kit fact sheet **Pelvic floor muscle exercises** or call our Specialist Nurses on our confidential helpline. If exercises do not help, your doctor or nurse can discuss other treatments with you. Some men also find it helpful to wear absorbent pads inside their underwear to soak up any leaks.
- **Blood in your urine.** You may notice blood in your urine for a couple of weeks after your operation. Sometimes the urine clears and

then you see a small amount of blood 5 to 10 days after your operation, as the internal scab comes away. This is a normal part of the healing process. Rarely, men may notice occasional blood in their urine several months or years after the operation. This is probably caused by prostate tissue gradually re-growing and stretching the new blood vessels which have formed on the surface of the prostate. However, you should visit your GP to check for other possible causes.

- **Urine infection.** There is a small risk of a urine infection. Contact your GP if you develop a high temperature, your urine is smelly or cloudy, or you have a burning sensation when you urinate.
- **Slow urine flow.** Scar tissue from the operation can narrow the urethra or bladder neck, slowing down the flow of urine. This affects around 4 out of 100 men (4 per cent) after a TURP. A simple operation can remove the scar tissue.
- **Retrograde ejaculation.** You may notice that you pass little or no semen when you orgasm. Instead, the semen goes into your bladder and is passed out of the body the next time you urinate. This may feel quite different to the orgasms you are used to. It is called a retrograde ejaculation and happens because the neck of the bladder sometimes becomes wider during the operation. It affects between 6 and 7 out of 10 men (65 per cent). Men who have retrograde ejaculations may not be able to father children through sex. However, this is still possible so you should continue to use contraception.
- **Difficulty getting or keeping an erection (erectile dysfunction).** Up to 7 out of 100 men (7 per cent) may have erectile dysfunction after a TURP. However, we are not sure if erectile dysfunction is caused by the operation or by other factors, such as age and other health conditions. If you have good erections before the operation, you may be less likely to have problems afterwards.

## More information

### Bladder and Bowel Foundation

[www.bladderandbowelfoundation.org](http://www.bladderandbowelfoundation.org)

**Helpline 0845 345 0165**

Provides information and support for all types of bladder and bowel problems.

### British Association of Urological Surgeons

[www.baus.org.uk](http://www.baus.org.uk)

**Phone 020 7869 6950**

Provides information on treatments for an enlarged prostate.

### eMC Medicine Guides

[www.medicines.org.uk/guides](http://www.medicines.org.uk/guides)

For information on UK licensed medicines, including how to use or take your medicine, possible side effects, and interactions your medicine may have with other medicines, food or alcohol.

### National Institute for Health & Clinical Excellence (NICE)

[www.nice.org.uk](http://www.nice.org.uk)

Provides national guidelines on promoting good health and preventing and treating ill health, including prostate problems.

### NHS Choices

[www.nhs.uk](http://www.nhs.uk)

Provides information to support you in making decisions about your own health including an A-Z of treatments and conditions, and information on NHS health services in your local area.

### Patient UK

[www.patient.co.uk](http://www.patient.co.uk)

Contains information that GPs use with their patients, including information on prostate problems. It also provides a directory of UK health websites.

### The Royal College of Anaesthetists


[www.rcoa.ac.uk](http://www.rcoa.ac.uk)

**Telephone 020 7092 1500**

Provides information to help prepare you for having an anaesthetic.

## About us

Prostate Cancer UK fights to help more men survive prostate cancer and deal with other prostate diseases so they can enjoy a better life.

This fact sheet is part of the Tool Kit. You can order more Tool Kit fact sheets, including an  **A-Z of medical words**, which explains some of the words and phrases used in this fact sheet.

All of our publications are available to download and order from the website. You can also order printed copies by calling **0800 074 8383** or emailing [literature@prostatecanceruk.org](mailto:literature@prostatecanceruk.org)

At Prostate Cancer UK, we take great care to provide up-to-date, unbiased and accurate facts about prostate cancer and other prostate problems. We hope these will add to the medical advice you have had and help you to make decisions. Our services are not intended to replace advice from your doctor.

References to sources of information used in the production of this fact sheet are available at [prostatecanceruk.org](http://prostatecanceruk.org)

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## Speak to our Specialist Nurses

**0800 074 8383\***

**prostatecanceruk.org**

### Donate today – help others like you

Did you find this information useful? Would you like to help others in your situation access the facts they need? Every year, 40,000 men face a prostate cancer diagnosis. Thanks to our generous supporters, we offer information free to all who need it. If you would like to help us continue this service, please consider making a donation. Your gift could fund the following services:

- £10 could buy a Tool Kit – a set of fact sheets, tailored to the needs of each man with vital information on diagnosis, treatment and lifestyle.
- £25 could give a man diagnosed with a prostate problem unlimited time to talk over treatment options with one of our Specialist Nurses.

To make a donation of any amount, please call us on **0800 082 1616**, visit [prostatecanceruk.org/donations](http://prostatecanceruk.org/donations) or **text PROSTATE to 70004\***. There are many other ways to support us. For more details please visit [prostatecanceruk.org/get-involved](http://prostatecanceruk.org/get-involved)

\*\*You can donate up to £10 via SMS and we will receive 100% of your donation. Texts are charged at your standard rate. For full terms and conditions and more information, please visit [prostatecanceruk.org/terms](http://prostatecanceruk.org/terms)



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**Call our Specialist Nurses from Mon to Fri 9am - 6pm, Wed 10am - 8pm**

\*Calls are recorded for training purposes only.

Confidentiality is maintained between callers and Prostate Cancer UK.

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