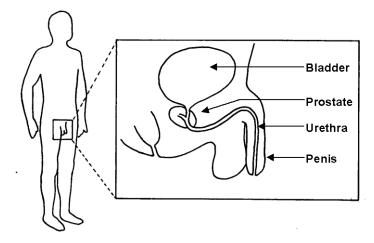


Radical Prostatectomy Surgery

The **prostate** is the sexual gland that makes fluid to nourish and help sperm move around. Sperm travel through pathways called seminal vessels. The prostate surrounds the urethra at the neck of the bladder.

The **bladder** stores urine made by the kidneys.

The **urethra** is a tube that takes urine and sperm out of the body.



Lymph nodes drain and filter fluid from the body. There are many lymph nodes found all over the body.

During radical prostatectomy surgery, all of the prostate gland and some or all of the seminal vessels are removed. The lymph nodes in the area around the prostate gland are sometimes removed if there is concern about the spread of cancer.

You are in the hospital for 2 to 3 days.

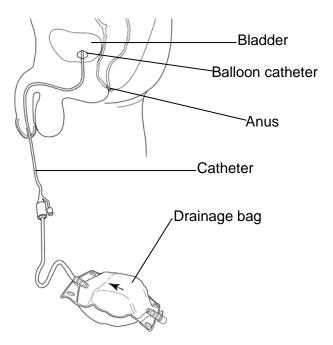
What happens during surgery?

You will have a general anesthetic. A general anesthetic puts you to sleep during the surgery.

You may have 1, 2 or 3 IV's (intravenous) to give you fluid and medication. When you wake up, you will have only 1 IV in your arm. The others are removed and covered with small bandages.

The surgeon makes an incision along the lower part of your abdomen and examines and tests the lymph nodes to see if the cancer has spread. This is called a lymph node dissection. The surgeon will remove the prostate and will stitch your bladder to a part of your urethra using delicate sutures.

If the prostate is removed, a thin tube called a catheter is put into your urethra and into your bladder. At the tip of the catheter, there is a small balloon. This balloon sits in your bladder and holds the catheter in place. The catheter drains your urine until your surgeon feels you no longer need it.



Catheter with drainage bag

What can I expect after surgery?

Pain

You will have some pain from the incision after surgery. You may feel sick to your stomach. If you have these feelings, tell your nurse. Your nurse will give you medication that can help.

IV

After surgery, you will have an IV in your arm. The IV is used to give you medications and fluids until you are drinking well. Medication may also be given to you through the IV.

Eating and drinking

Your nurse will tell you when you can start drinking and eating after surgery. Avoid drinking fluids containing caffeine, such as coffee, tea, hot chocolate and cola. Caffeine may irritate your bladder. When you are home continue drinking extra fluids until your urine is clear. This may take up to 4 weeks. If you have heart or kidney problems, check with your doctor about drinking extra fluids.

If you have heart or kidney problems, check with your doctor about the amount of fluids you should have.

You should not strain to have a bowel movement. Straining may cause bleeding in your bladder. Eating foods high in fibre and drinking fluids can prevent constipation. Foods high in fibre include whole wheat products, bran cereals, fresh vegetables and fruit. You should use stool softeners if you have a problem with constipation. Ask your doctor or pharmacist for information about stool softeners.

Incision

You will have a light bandage or tape over the incision. There are stitches, staples or clips underneath. The nurse will check your incision and bandage. It is common to have bruising or swelling around the incision. The surgeon will remove the stitches, staples or clips 7 to 10 days after surgery. It will take 6 to 8 weeks for your incision to heal well.

Pat dry your incision well after you shower. If your bandage falls off or gets wet, you can replace it with dry gauze dressing and paper tape such as Micropore®.

Drain

After surgery, you will have a small, flat tube coming out of a smaller incision. This is called a drain. It helps drain old blood and fluid from the surgery. If you have a drain, the nurse may attach a bag to it to collect the drainage and keep you dry. The drain stays in until the drainage decreases and your surgeon tells the nurse to take it out. You may have swelling and bruising of the penis and scrotum. This is of no concern and will go away over the next 2 to 3 weeks.

Moving around and exercises

Do your deep breathing and coughing exercises often after surgery. The first time you get up, ask your nurse to help you. Your nurse will show you how to walk with all your tubes and bags. As you feel stronger, you will be able to take longer walks.

Moving, walking and doing your exercises after surgery will:

- keep your muscles strong
- prevent breathing problems
- help your blood move around your body
- prevent constipation

Catheter

The catheter will stay in your bladder between 2 and 3 weeks. Your nurse will show you how to care for the catheter. If you feel comfortable you may want to have another family member or friend learn too.

What does a catheter feel like?

At first, you may feel like you have to urinate. You may also have a burning sensation around your penis. You may have leaking around the catheter.

Sometimes you may feel a sudden pain and have the need to urinate. You may also see urine come out around the catheter. This is caused by bladder spasms and you cannot control these. You do not want any tension on the catheter. Make sure the catheter is not blocked and is taped properly. If the spasms continue, contact your surgeon.

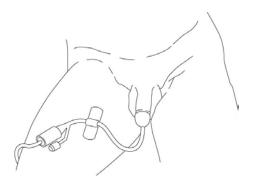
When your catheter is in, you may notice:

- grey or white tissue in your drainage bag
- blood around your penis where the catheter goes in
- your urine has a pink colour from a little blood

These are all normal.

Taping the catheter

Your nurse will show you how to tape the catheter so it does not pull when you walk. At home, check the tape everyday and change as needed.



Taping the catheter helps keep the catheter in place.

Wearing a drainage bag

You may have 2 bags:

- A small bag that you can strap around your leg so you can walk around. This bag can be hidden under pants. Your nurse will show you how to put it on and empty it. You need to have it firm enough to stay on, but not too tight that it stops the flow of blood.
- A larger or night bag that you can attach to the side of your bed while sleeping. You will be shown how to attach and empty the bag.

It is very important that the bag is lower than your bladder.

Shower and bath

You cannot have a bath until the catheter is out.

You should take a shower. Do not shower wearing the leg straps as they take too long to dry. Wet straps can cause skin problems.

Activity

You can do any activity that keeps the drainage bag below your bladder. You cannot swim or use a hot tub.

Cleaning around the catheter

Your nurse will show you how to clean the area around your penis and catheter. Cleaning needs to be done 2 to 4 times a day. Your surgeon may tell you to put some medicated ointment around this area.

- Wash your hands with soap and water first.
- Gently wash the penis and area around the catheter. Wash the catheter tube also. Be careful not to pull on the tube.
- · Remove any crusted drainage or blood.
- Rinse well and pat dry with a clean towel.

Washing the drainage bag

Wash and rinse the drainage bag once a day:

- 1. Wash your hands with soap and water.
- 2. Wash the bag in the sink or tub using warm water and dish detergent.
- 3. Rinse the bag well, using warm running water.
- 4. For control of odour, rinse the bag with a solution of ½ water and ½ vinegar.
- 5. Air dry the bag on a clean towel. Do not dry the inside of the bag.

To attach the bag to the catheter

- 1. Wash your hands with soap and water.
- 2. Wipe the tips of the bag and catheter with an alcohol wipe.
- 3. Connect the tip of the catheter to the bag.

Activities when you get home

Here are some general guidelines for activity. Ask your surgeon about activities you like to do.

Exercise

Gradually return to your normal activities.

You can do moderate exercise like walking and stretching.

If you notice blood in your urine stream after an activity or exercise; stop, rest and drink extra fluids to wash out your bladder.

Do not do any heavy lifting for 6 to 8 weeks. Heavy lifting means no more than 10 pounds or 4 kilograms. This weight is like a:

- full bag of groceries
- small suitcase
- small baby

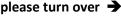
Do not do strenuous exercise like shovelling snow, vacuuming, bicycling or mowing the lawn for 3 to 8 weeks.

Driving

Follow your surgeon's advice about when you can drive.

Drain

If you go home with a drain, a home care nurse will visit you. The nurse will measure the drainage and remove the drain when the surgeon says so.



Follow-up

The surgeon's office will call you with your follow-up appointment.

If you have any questions or problems, please ask your surgeon.

Call the surgeon if:

- you have pain that does not get better
- you have vomiting
- you have no urine draining from the catheter
- you have chills or a fever over 38°C or 100°F

When the catheter comes out

Your surgeon will take the catheter out in the office. After it is out, you may be incontinent for 4 to 6 months. This means that you do not have full control of your bladder. You may leak or dribble urine without control.

You will need to use incontinence products. The Community Care Access Centre or your pharmacy can provide advice about this if needed.

Do pelvic muscle exercises regularly to help the muscles that control urine flow:

- 1. Squeeze the muscles you use to prevent passing rectal gas.
- 2. Hold and count slowly ... 1 and 2 and 3 and
- 3. Relax for ... 1 and 2 and 3.
- 4. Do this 10 times, each time you exercise. This is called a set.
- 5. Begin doing 1 set, 2 times a day. Increase to doing 1 set, 5 times a day.
- 6. As you get better at doing these exercises, you can count to 5 and then relax for a count of 5.

Remember: You must relax your muscles for the same amount of time, every time. You can do these exercises sitting, standing or lying down. No one can see you doing these exercises.