

T.U.R.P.

(TRANSURETHRAL RESECTION OF THE PROSTATE)

What is a T.U.R.P.?

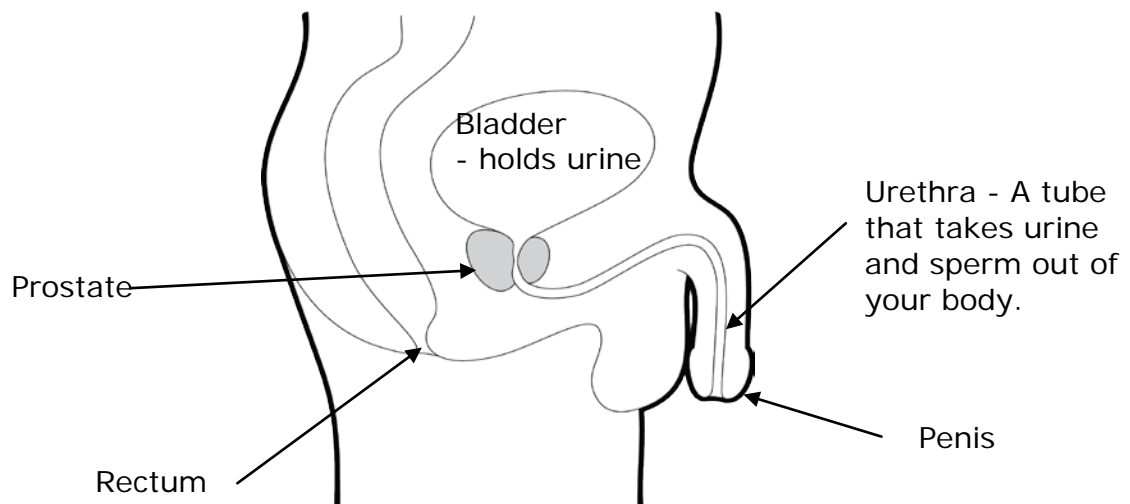
T.U.R.P. stands for TransUrethral Resection of the Prostate. It is surgery of the prostate gland, done through the urethra.

The prostate is a gland that makes fluid to nourish and help sperm movement. It surrounds the urethra at the neck of the bladder.

Why do I need a T.U.R.P.?

As you become older, your prostate may increase in size. This is a normal part of aging and is common in men over the age of 50. Sometimes, the increased size of the prostate blocks the urethra. This makes it hard to start to urinate, and empty your bladder completely. This may cause dribbling at the end of the urine stream. There are times when the size of the prostate completely blocks the ability to urinate. Urgent surgery is needed if this happens.

A T.U.R.P. unblocks the urethra and makes it easier for you to urinate and empty your bladder completely.



How long will I be in the hospital?

Usually, you will spend one night in the hospital.

What happens during a T.U.R.P.?

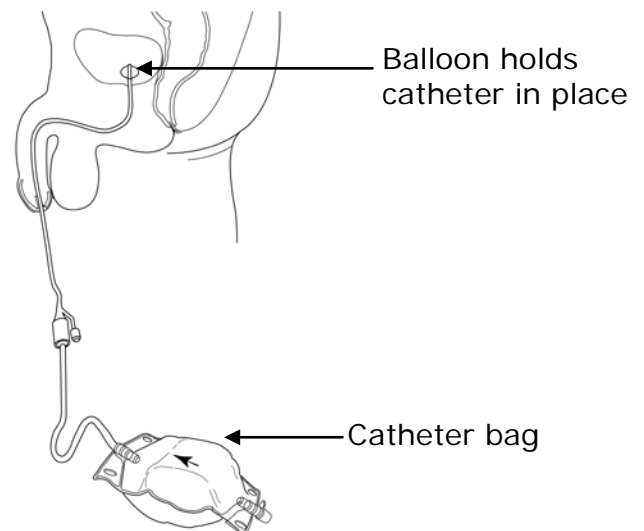
You will have an IV (intravenous) to give you fluid and medication. The IV stays in until you are drinking fluids after surgery.

The anesthesiologist will give you the anesthetic. You may have a general or spinal anesthetic. A general anesthetic will put you to sleep during the surgery. With a spinal anesthetic and sedation, you will be awake during surgery, but you cannot feel pain from the waist down.

During surgery, the surgeon puts a small lighted tube through your urethra to look at your prostate gland. The prostate tissue which is blocking the urethra is then removed with this instrument.

A thin tube, called a catheter, is put through your urethra into your bladder. This catheter drains urine. At the tip of the catheter there is a small balloon. This balloon sits in your bladder and holds the catheter in place.

- Urine may be pink in colour.
- The catheter is attached to a drainage bag.
- The bag is kept lower than your bladder to prevent back flow.



What can I expect after surgery?

Bladder irrigation

The inside of your bladder will be flushed with a water solution through the catheter. The fluid washes any urine, blood or tissue out of your bladder. This is called bladder irrigation. There are 2 ways that this may be done: continuous irrigation or hand irrigation.

Continuous irrigation

You will have plastic bags of fluid hanging above your bed connected to the catheter in your bladder. The fluid then drains from the bladder into a drainage bag hanging at your bedside. The drainage bag must be kept lower than the level of your bladder. This prevents urine from flowing back into your bladder, which may cause an infection.

Hand irrigation

Your nurse will push fluid into the bladder with a syringe and then take fluid out with a syringe.

Pain and discomfort

Most men do not have much pain but you may feel as if your bladder is full. When the catheter is in, you may feel pressure, spasms, burning or a need to urinate until it is taken out.

After your catheter is removed, you may notice:

- a burning feeling when you urinate
- an urgent need to urinate
- some blood or small clots in your urine
- some dribbling of urine

These things will improve as you recover. Remember to drink lots of fluids.

You can take acetaminophen (Tylenol) if needed.

Medications

Certain medications may increase the risk of bleeding after surgery such as aspirin, blood thinners, arthritis medications and herbal supplements. If you take any of these types of medications, ask your surgeon when you can start taking them again.

Catheter

The catheter usually is taken out before you go home but some patients may go home with the catheter for a day or two. Home care will be arranged if you go home with a catheter.

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.

Note: You may have some blood in your urine for up to 6 weeks after surgery. Do not hold your urine for long periods of time.

Eating and drinking

Follow your normal diet. Drink plenty of fluids: 6 to 8 glasses of water a day to keep your urine clear. Do not have any drinks or products that contain caffeine, such as coffee, tea, hot chocolate, cola and chocolate.

If you have heart or kidney problems, check with your surgeon about how much to drink.

Do not strain to have a bowel movement. Straining may cause bleeding from the prostate. Eating foods high in fibre and drinking fluids can help prevent constipation. Foods high in fibre include whole wheat products, bran, fresh vegetables and fruit. Extra fluids also help. A non-prescription stool softener may help. Ask your pharmacist if you are unsure what to buy.

Activity

- Gradually return to your normal activities.
- Do not do strenuous activities like shovelling snow, vacuuming or cutting grass for 3 weeks.
- Do not do any straining or heavy lifting for 2 to 3 weeks. Heavy lifting means no more than 4 kgs or 10 pounds. These activities can cause bleeding. Ask your surgeon about any specific activities that you would like to do and how much recovery time you will need.

Driving and riding in a vehicle

Follow your surgeon's advice about when you can drive. Avoid long car rides and holding your urine for long periods of time.

Sexual activity

Please discuss this with your surgeon. Most men can resume normal sexual activity in about 3 weeks.

During sexual activity you will feel as if ejaculation is taking place, but fluid may not come out of your penis. The fluid goes into your bladder instead and will come out the next time you urinate. This is normal after this surgery and is not harmful.

Shower or bath

You can take a shower with a catheter, but no tub baths until the catheter is out.

Follow-up

You will be given instructions about making an appointment with the surgeon for your follow-up visit.

Call your surgeon if:

- you have any questions or problems
 - you cannot urinate or find it difficult to urinate
 - you notice bright red bleeding or clots in your urine which do not clear with drinking fluids or resting
 - you have abdominal pain or pain that does not get better
 - you have chills or a fever of 38°C (100°F) or higher
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If you go home with a catheter

Shower and bath

You cannot take a bath until the catheter is out. You can 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. Do not swim or use a hot tub. Make sure that the catheter is secured so it does not pull when you walk.

Cleaning around the catheter

Your nurse will show you how to clean around your penis and catheter. Cleaning needs to be done 2 to 4 times a day. Your doctor may order a medicated ointment to be put on after cleaning.

- Wash your hands with soap and water first.
 - Gently wash the penis and area around the catheter.
 - Wash the catheter also. Be careful not to pull on the tube.
 - Remove any crusted drainage or blood.
 - Rinse well and pat dry with a clean towel.
 - Apply medicated ointment as taught.
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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.
- 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.
- It is very important that the bag is lower than your bladder. The bag should not touch the floor.

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 $\frac{1}{2}$ water and $\frac{1}{2}$ 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.

Notes
