

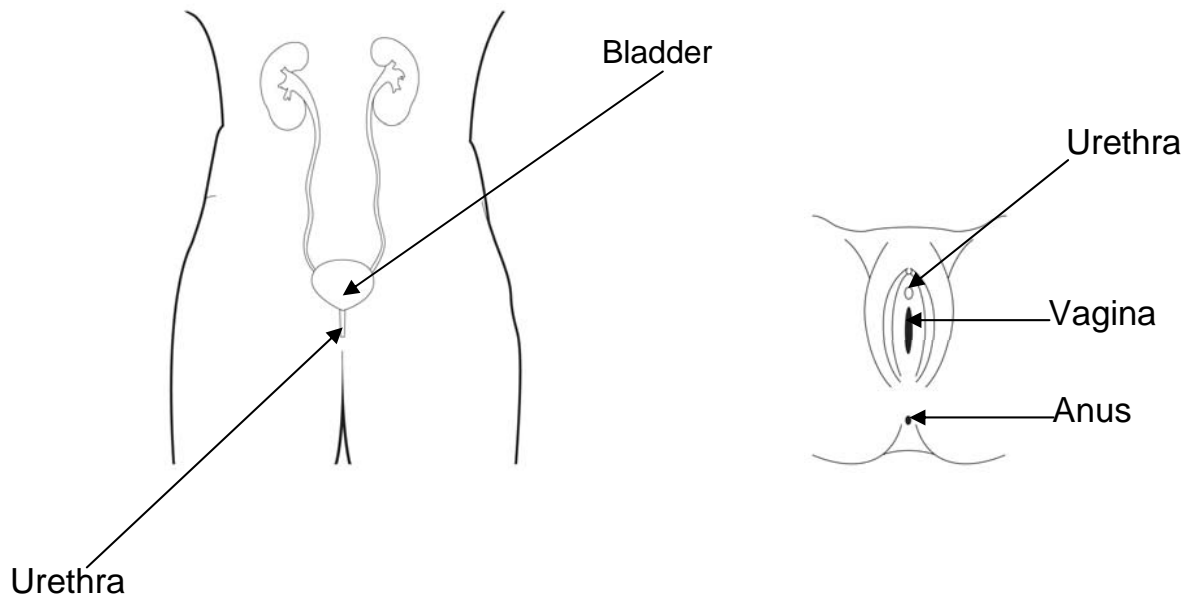
TransUrethral Resection for a bladder tumour – for women –

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

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

Resection means to take out or remove.

Transurethral means to pass through the urethra. The surgery is done through the urethra.



TransUrethral Resection of a Bladder Tumour is often called a T.U.R.B.T. It is surgery done to remove tumours in the bladder. The surgery is done by passing a special scope or tube through the urethra and then into the bladder. The tumour is removed with the special scope.

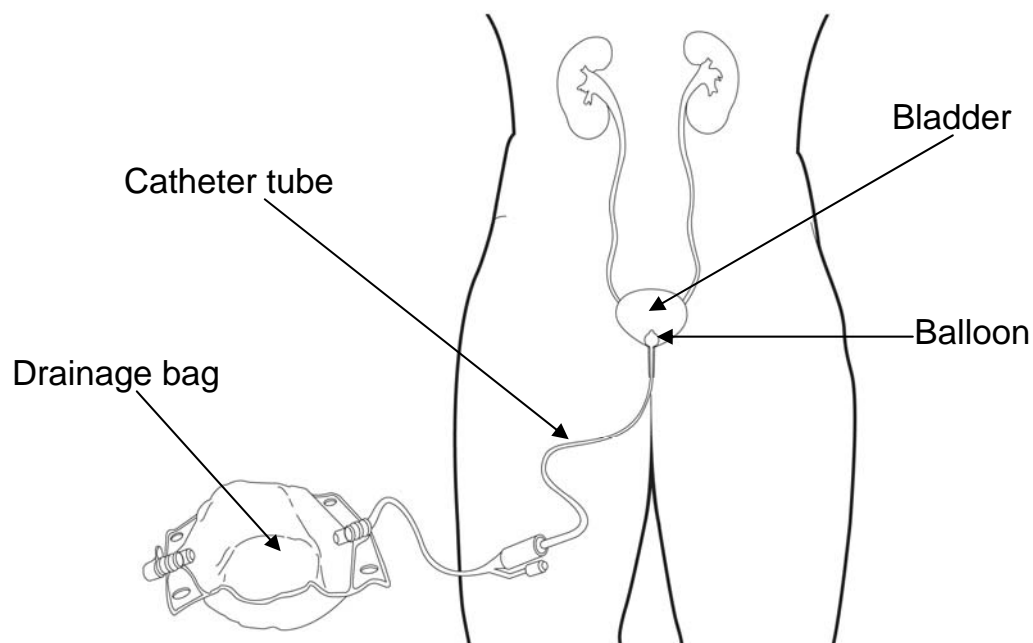
You will either go home from Same Day Surgery or have to stay in the hospital for 1 to 2 days.

What happens during surgery?

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 either 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.

A thin rubber 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. You may go home with the catheter.



What can I expect after surgery?

Bladder irrigation

- Your urine may be blood tinged for a few days. 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 women do not have much pain after surgery. You may feel like your bladder is full. You may feel pressure, spasms, or burning, until your catheter is taken out.

Catheter

With a catheter, you may feel a sudden pain and have the need to urinate. You may have a burning feeling around your urethra.

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.

Catheter (continued)

The catheter may or may not be taken out before you go home. 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
- your urine has a pink colour from a little blood

This is normal.

Note: Your urine may look light red or pink coloured for a few days. Your urine may get red again about 10 days after surgery. **Do not hold your urine for long periods of time. Urinate when you feel the need to.**

After your catheter is removed, you may notice:

- a burning feeling when you urinate
- you feel an urgent need to urinate and rush to the bathroom. This may last for up to 1 month after surgery.
- there is some blood or small clots in your urine
- some dribbling of urine for up to 4 weeks after the surgery.
- some blood in your urine at the start or end of urination. This may last for about a month.

These things will improve as you recover. Remember to drink 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.

Eating and drinking

Your nurse will tell you when you can start drinking fluid and eating after your surgery. Avoid drinks that contain caffeine, such as coffee, tea 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.

Do 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.

Shower or bath

You cannot have a tub bath until your catheter is taken out. You can take a shower with your catheter in. Do not shower wearing the leg straps as they take too long to dry. Wet straps can cause skin problems.

When menstruating, you can use pads or tampons if they feel comfortable. Change the pad or tampon often and clean your perineal area after each pad or tampon change.

Moving around

The first time you get up, ask your nurse to help you. If you have tubes and bags, your nurse will show you how to walk with them.

As you feel stronger you will be able to take longer walks.

Moving and walking will:

- keep your muscles strong,
 - prevent breathing problems,
 - help your blood move around your body, and
 - help prevent clots from forming in your legs.
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Activities when you go home

- Gradually return to your normal activities. If you notice blood in your urine after an activity or exercise; stop, rest and drink extra fluids to wash out your bladder.
- Even if you are resting and you notice blood in your urine, drink extra fluids to wash out your bladder.

Lifting

- Do not do any heavy lifting for 2 to 3 weeks after surgery. 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 weeks. Ask your surgeon about specific activities that you wish to do.

Driving and riding in a vehicle

You can drive a vehicle a day or 2 after leaving the hospital. Avoid long car rides and holding your urine for long periods of time.

Sexual activity

Usually, you can resume sexual activity when you feel comfortable. Your surgeon may want you to wait until 3 weeks after surgery. Please talk with your surgeon about when you can resume sexual activity.

If you go home with a catheter

Activity

You can do any activity that keeps the drainage bag below your bladder. You cannot bathe, 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

- Wash your hands with soap and water.
- Using a clean washcloth, wash your perineum with soap and water.
- Gently wash any dry drainage or blood from around the catheter.
- Wash from front to back only.
- Rinse and dry gently.
- Do this every morning, at bedtime and when needed.
- Secure the catheter as needed.

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. The bag should not touch the floor.
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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.

When do I see the surgeon again?

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