

**CENTER FOR UROLOGIC CARE  
GUY T. BERNSTEIN M.D., F.A.C.S.  
THOMAS F. LANCHONEY, M.D.  
245 Bryn Mawr Avenue  
Bryn Mawr, PA 19010  
(610) 525-2515 Fax (610) 527-6586  
www.urologiccare.com**

## **TREATMENT OPTIONS FOR THE ENLARGED PROSTATE**

More than half of men over age 60 have enlarged prostates, and the likelihood of developing benign prostatic hypertrophy (BPH) increases with age. BPH affects the innermost part of the prostate first, so the enlargement frequently results in a gradual squeezing of the urethra where it runs through the prostate, sometimes causing difficulty urinating or other urinary problems. **It is important to note that BPH is not cancer nor does it lead to cancer, although a man can have both BPH and prostate cancer.**

What are the symptoms of BPH?

- a weak urinary stream
- a sense of incomplete bladder emptying
- difficulty starting urination
- frequent urination
- urgency (difficulty postponing urination)
- awakening frequently at night to urinate
- interruption of the stream (starting and stopping)

**BPH requires treatment only if symptoms are bothersome or urinary function is severely affected.** If you have BPH but are not bothered by your symptoms, it is reasonable to choose a program of "watchful waiting" - involving yearly or more frequent checkups with digital rectal examinations. If you are concerned about the way you urinate, the following is a list of treatment options:

### **Medical management**

**Medical management is a good option for a man with mild to moderate symptoms of an enlarged prostate who does not mind taking a medication daily. However, not everyone responds to these medications.**

**Hytrin (terazosin), Cardura (doxazosin), and Flomax (tamsulosin) and Uroxatral (alfuzosin)** are alpha-blockers used in the treatment of hypertension. They also relax the muscle tissue in the prostate and may relieve part of the blockage caused by an enlarged prostate gland if taken daily. Approximately 40-50% of men have an improvement in urination on these medications. They have been approved by the FDA for treatment of prostate enlargement. Rarely, they can cause a decrease in blood pressure which can result in light-headedness or dizziness.

**Proscar (finasteride) and Avodart (dutasteride)** partially shrinks the enlarged prostate by blocking the effect on the prostate of the major male hormone, testosterone. It must be taken daily and can take up to six to nine months to notice an improvement in urination. Approximately 30% of men have improved with these medication, and less than 6% have had problems with sexual activity.

### **Minimally Invasive management**

**These procedures are performed in the office with local anesthesia and oral medications.**

**Cooled Transurethral Microwave Thermoablation (Targis)** is a technique using controlled doses of heat to shrink an enlarged prostate. Microwave energy is delivered through a catheter inserted into the urethra under local anesthesia. The Targis procedure is performed in our office and usually takes one hour. This FDA approved procedure is covered by most insurance plans.

**Interstitial Laser Coagulation (Indigo)** is a technique using controlled doses of heat to shrink an enlarged prostate. Laser energy is delivered through a diode laser fiber inserted directly into prostate tissue. This FDA approved procedure is covered by most insurance plans.

**Transurethral Needle Ablation (TUNA)** is a technique using thermotherapy delivered via radiofrequency to destroy obstructive prostate tissue. Both the Indigo and TUNA procedures require the use of a rigid cystoscope. This FDA approved procedure is covered by most insurance plans.

### **Surgical management**

**Surgical management is currently the most widely accepted method of treatment when BPH symptoms are bothersome.**

**TURP (transurethral resection of the prostate)** is the most common surgical procedure and involves removing the innermost core of the prostate through the urethra. The procedure is performed under anesthesia and requires an overnight stay in the hospital. Postoperative problems are few but can include urinary tract infection, bleeding, and scar tissue developing along the urethra. TURP does not usually interfere with a man's sexual functioning. However, 10% of men become impotent after surgery. Most men do develop retrograde ejaculation (semen flows into the bladder) which does not cause any harm.

**Greenlight PVP Laser Prostate Procedure** is the newest procedure available to treat the enlarged prostate. Like standard TURP, prostate tissue is destroyed enlarging the channel through which you urinate. However, the operation is shorter, the hospital stay is only 1 day, and the possibility of any postoperative problem is greatly reduced. The treatment appears to be as effective as the traditional TURP. We are one of the first hospitals in the Delaware Valley to offer this new technique.

**Open prostatectomy** is necessary only for a very large prostate gland which can not be treated with instruments through the urethra.

**The good news is that you need not suffer from bothersome BPH symptoms. Such symptoms are not a necessary part of getting older. They can be treated, and the number of treatment choices is increasing every year. Fill out a prostate symptom score sheet today, and please feel free to ask us questions about treatment options for enlargement of the prostate.**