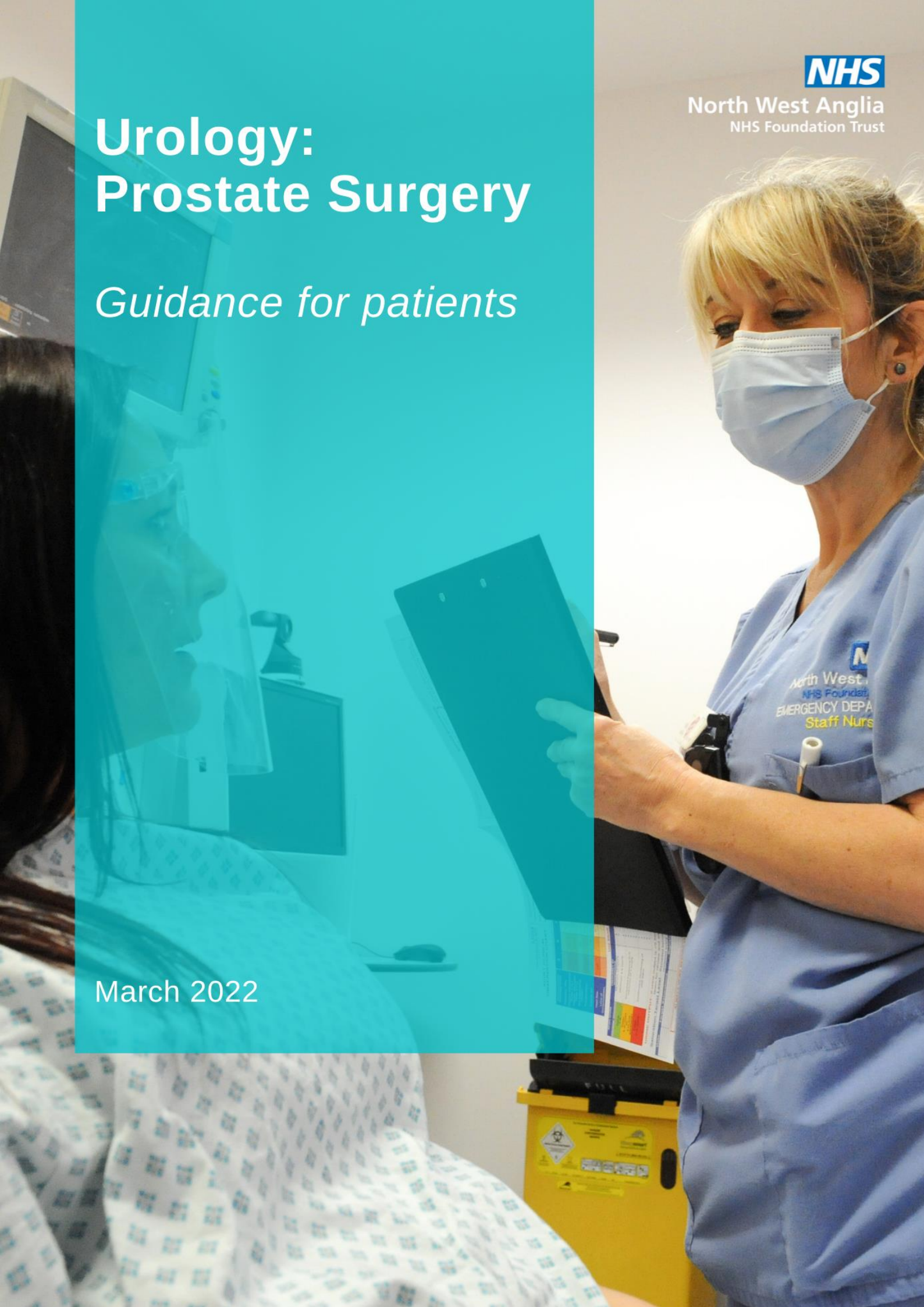


Urology: Prostate Surgery

Guidance for patients

March 2022



Urology: Prostate Surgery

Introduction

The Covid pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you can support yourself while waiting to attend the hospital. The guidance has been reviewed by clinicians who are responsible for your care.

Guidance for Patients with enlarged prostate awaiting prostate surgery

Benign enlargement of the prostate can produce urinary tract symptoms or waterworks symptoms that in medical term are called lower urinary tract symptoms (LUTS).

Lower urinary tract symptoms can be treated with lifestyle modifications advice (reducing fluid intake at night and reducing fizzy drinks such as tea coffee and other acidic fluids) or with tablets as advised by your doctor. When your hospital doctor has decided that medical treatment is no longer good enough to improve your waterworks troubles, he/she would've listed you for a prostate surgery. This means that your waterworks are bad enough and cannot be supported or treated properly by lifestyle modification advice or medical conservative management including tablets. Some of you would've had severe enough lower urinary track symptoms that have caused urinary retention and you will have a urinary catheter in your bladder to drain it. Such patients could have been advised to have prostate surgery too. We summarise advice for those patients that have a catheter in the bladder and those who do not have urinary catheter.

Patients Without Catheters

Your doctor has made a decision that you need to have prostate surgery and whilst you're waiting for the prostate surgery adhering to the following advice could be helpful.

1. Take your prostate medication in the morning and do not assume it is not working. Whilst it has not improved your symptoms to your satisfaction it still helps empty your bladder and could avoid urinary retention. Avoiding taking these medications can be dangerous.
2. Hydrate yourself appropriately with 2 to 3 Litres of clear fluids such as water and avoid having acidic fluid such as juices and refrain from too much tea and coffee. The later could irritate your bladder and make your symptoms worse.
3. Watch the colour of your urine and if it is more concentrated and looks more than a lemon juice in colour it means you have not had enough fluid and you would need to increase your fluid intake.
4. Watch for burning sensation on passing urine if this is the case you would need to consult your local GP surgery in case this is a urinary tract infection. This could sometimes means concentrated urine due to inadequate fluid intake.
5. Watch for pain below the umbilicus and above the pubic region as this could indicate bladder infection in such cases you need to get in contact with your local GP surgery immediately to avoid having severe urinary tract infection or urinary retention requiring hospitalisation.

6. Avoid constipation by using lots of fruits, vegetables and avoiding the drugs that could cause constipation as we know that unhappy bowel will lead to unhappy bladder.
7. If you are having surgery other than for prostate, please let your consultant know that you are having severe lower urinary tract symptoms and awaiting prostate surgery. General anaesthesia for any condition could essentially put you into urinary retention hence your doctor may put a temporary urinary catheter in the peri-operative period to avoid urinary retention and the complication associated with it.
8. Watch for loss of urine at sleep (wetting bed at night), we call this nocturnal enuresis if this is the case this is a urological emergency, and you should be attending accident and emergency and letting the urology team know. This indicates that your kidneys are no longer effectively emptied into the bladder and could prove to cause irreversible damage to your kidneys.
9. Look at your urine for possible blood in it and if this is the case, please let your GP know immediately.
10. Pains and/or heaviness in either loins are indicative of possible kidney obstruction or infection due to large amount of urine in the bladder and if this is the case, please either attend accident and emergency for scanning and imaging or let your GP know with immediate effect.
11. Finally observe yourself for high temperature and if this is in conjunction with abdominal pain than this is a urological emergency you should be attending accident and emergency without delay

Patients with catheter awaiting prostate surgery

Your prostate enlargement could be bad enough to create bladder out obstruction and hence you'll be fitted with a urinary catheter, and you will be put on the waiting list for prostate surgery.

1. You need to be aware that the catheter is not a permanent solution and catheter has to be changed every 8 to 12 weeks depending on the advice you get from district nurses.
2. Your consultant at the hospital should be aware of the fact that you have urinary retention and have in situ urinary catheter awaiting for prostate surgery and on this basis he/she would put you on the semi-urgent list for prostate surgery.
3. You would need to adhere to the advice of adequate hydration, looking at the colour of urine and emptying your day and night bags regularly to avoid over distention of the bags which could have an impact on bladder emptying. Listen to the advice given by the district nurses. They have a wealth of experience and knowledge adhering to their advice prevent problems.
4. Change in the smell of the urine could be indicator of bacterial growth however not all bacterial growth in the presence of urinary catheter require antibiotics. If you have no symptoms such as pains in the abdomen or fever this may be significant. However, presence of aforementioned symptoms means you need to have antibiotics and consult your GP.
5. Decreased catheter output associated with high temperature is an indicator of severe urinary tract infection and you should consult your GP or local hospital immediately.

6. If you have a urinary catheter and are taking blood thinning medication such as aspirin, warfarin, or any other blood thinning agents you are likely to bleed now and again from the urinary catheter. You need to make your GP alerted to this he/she may need to adjust the dose of your blood thinning medication or consider stopping it. In the presence of blood clots in the catheter causing poor drainage of urine into the bag you would need to attend accident and emergency without the need to consult your GP.

Contact Us

Peterborough and Stamford Hospitals - [01733 678000](tel:01733678000)

Hinchingbrooke Hospitals - [01480 416416](tel:01480416416)