How can I help reduce healthcare associated infections?

Infection control is important to the well-being of our patients and for that reason we have infection control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. We ask that you, and anyone visiting you, use the hand sanitiser available at the entrance to every ward before coming in to or after leaving the ward. In some situations hands may need to be washed at the sink using soap and water rather than using the hand sanitiser. Staff will let you know if this is the case.

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If you require an alternative format of this leaflet please call 01296 316042

References


Laser Prostatectomy

Removal of the centre of the prostate with laser vaporisation

A patient information leaflet about the procedure, general outline and aftercare for laser prostatectomy

Author: P. Ging
Issue date: October 2015
Review date: October 2018
Where and What Is the Prostate Gland?

The prostate gland sits at the base of the bladder and surrounds the urethra (the tube that carries urine from the bladder to the end of the penis). As you get older the prostate can become enlarged and block or reduce the flow of urine.

What are the symptoms of an enlarged prostate?

As the prostate enlarges it can restrict the normal flow of urine which forces the bladder muscles to work harder. The wall of the bladder becomes more sensitive and it becomes harder to empty the bladder completely. This can lead to any, or all, of the following symptoms:

- Poor flow of urine
- An urgent desire to pass urine (urgency)
- Passing urine more often (frequency)
- A feeling of not emptying the bladder completely
- A delay in starting to pass urine
- Urine leakage
- In some cases there may be a sudden inability to pass urine

Some men, with an enlarged prostate, have their symptoms monitored and require no treatment and some are managed with drug therapy. Others require an operation such as a Laser Prostatectomy or a Trans Urethral Resection of Prostate (TURP).

How will I be followed up after my operation?

You will either be given an appointment before you leave or it will be sent to you shortly after you have been discharged. It will be either for the prostatectomy telephone follow up clinic OR the consultant outpatient clinic.

Telephone Clinic
You will be given a date and time when the Prostate Nurse Specialist will telephone you at home to check on your progress. You will be asked to complete a short questionnaire about your symptoms that she will go through with you.

Outpatient Clinic
You will be given a date and time to attend the outpatient department at Wycombe, Amersham or Stoke Mandeville Hospital. You will be seen by your consultant or one of his team. They will check on your progress following the surgery and answer any questions you may have.

Who do I contact if I have a problem after my operation?

This leaflet gives a general outline of the procedure and after care. If you have any concerns or questions following your surgery please either contact your GP or Prostate Nurse Specialist on 01494 426020.
What should I expect when I go home?

**Exercise**
For the first two to three weeks it is advisable to have only gentle exercise such as short walks.

**Sex**
You can resume sexual activity after two to three weeks or when you feel ready.
As a result of the surgery you may have a dry orgasm as the semen might travel up into the bladder. This is also known as retrograde ejaculation. This does not cause any harm and you will pass the semen when you next pass urine. You are unlikely to father children following this operation but you will still need to use contraception as appropriate.

**Work**
It is best to allow one to three weeks before you return to work. However, if you have a physically demanding job you may need longer to recover.

**Driving**
You should not drive for one week following your operation. It is also advisable to check your insurance cover following surgery.

These are guidelines only. If you have any queries please check with your Doctor before you are discharged.

What is a Laser Prostatectomy?

After you have been given an anaesthetic (see paragraph below) a narrow telescope is passed up the penis allowing the urologist to see the prostate and the bladder. The tissue that is blocking the urethra is then vaporised using a laser. Sometimes it is not possible to perform the operation using the laser and a TURP will be performed instead. There is a separate leaflet available about this operation.

It is important to be aware that, although the majority of men experience an improvement in their symptoms after a prostatectomy, there is a small chance that your symptoms may persist despite having had the operation. If you have any questions regarding this please discuss them with your doctor or nurse.

What type of anaesthetic will be given?

The anaesthetist will see you before your operation to discuss which type of anaesthetic would be best for you. They will also discuss the potential risks attached to having an anaesthetic.

A general anaesthetic will make you sleep through the operation.

A spinal anaesthetic will make you numb from the waist down so that you feel nothing during the procedure. You may stay awake but the anaesthetist can give you sedation to make you relaxed and sleepy.
What happens after the operation?

On your return to the ward you will have a tube going into your bladder. This is called a catheter. It will be attached to a catheter bag to collect your urine.

You will also be encouraged to drink about three litres of fluid a day to help clear the urine. Do not be alarmed if there is blood stained urine in the catheter bag. This is quite normal. The catheter will normally be removed the morning after the procedure.

What should I expect when I go home?

Frequency and Urgency
You may experience the need to pass urine frequently and/ or the feeling that you need to go urgently for a few weeks after the operation but this will gradually settle. Some men also experience some discomfort when they pass urine. If these symptoms persist or you are concerned please contact your GP or the hospital.

Blood in the urine
This may continue for a few weeks. It is not uncommon to experience some extra bleeding approximately two weeks after the operation when the scab at the operation site falls away from the wound and breaks up in the urine. If you experience further bleeding try to drink more fluids to flush the system through. If you have heavy bleeding or are worried contact your GP.

Diet and Fluids
You should continue drinking at least two litres of fluid a day (alcohol in moderation) for three to four weeks. This will help settle any symptoms you may have as a result of the surgery. You should have a normal balanced diet with plenty of fibre (fruit and vegetables) to prevent constipation.

What can I expect once the catheter is removed?

After your catheter is removed you may have some burning and stinging the first few times you pass urine.

Initially you may have difficulty controlling your urine flow.

It is normal to experience some urgency and dribbling or leakage of urine.

Some men also experience pain at the tip of the penis when passing urine and when they have finished passing urine. This may persist for quite a while following surgery.

These symptoms may continue for several days or weeks.