

PATIENT INFORMATION**WHAT TO DO ABOUT AN ENLARGED PROSTATE**
(also known as *Benign Prostatic Hypertrophy* or BPH)***WHAT IS A PROSTATE GLAND?***

The prostate is a walnut-sized gland located between the bladder and the urethra, the tube that takes urine from the bladder to the outside. The prostate gland makes some of the substances in seminal fluid in a man's ejaculation. **Benign prostatic hyperplasia** occurs when the prostate enlarges, slowing or blocking the urine stream. Other names for it include benign prostatic hypertrophy, an enlarged prostate, and BPH. BPH occurs only in men; and increases in prevalence with age.

HOW DO I KNOW IF MY PROSTATE GLAND IS ENLARGED?

If you have any of the symptoms below, you may have an enlarged prostate, especially in men 50-79 years old:

- You need to push or strain to start the urine stream.
- Your urine stream is weak.
- You may have a strong and sudden desire to urinate that is hard to delay.
- After you stopped urinating, you feel that you have not completely emptied your bladder.
- You urinate often with relatively small volumes of urine.
- You wake up several times during the night to urinate.

CAN SERIOUS PROBLEMS RESULT FROM AN ENLARGED PROSTATE?

Benign prostatic hypertrophy, or BPH, is usually NOT dangerous and often not progressive. BPH may occasionally lead to urine infections and blood in the urine. In very few men, complete urine obstruction (blockage) may suddenly occur and may require temporary catheter placement to allow bladder emptying and prevent urine backup to the kidneys. BPH is not the same as prostate cancer, although the two conditions may coexist. Evaluation for cancer may involve a digital rectal exam, a prostate ultrasound, or a prostate biopsy.

EVALUATION FOR PROSTATE SYMPTOMS

Your doctor will likely take a careful history of your symptoms and estimate the size and consistency of the prostate by a rectal examination. A urinalysis will help exclude any blood or infection and reduce the likelihood of stones or cancer. Your doctor may also estimate your maximal urinary flow rate and the amount of urine left in your bladder after you fully void. Finally, you may provide a blood sample for a kidney function test and/or a prostate specific antigen (PSA) test, which may be high if the prostate is enlarged or if a prostate cancer is present.

SHOULD I GET TREATMENT FOR MY SYMPTOMS?

It may be that your symptoms will not get worse, and they may actually get better over time, without any treatment. Some men are able to adjust to moderate symptoms, while other men are bothered by even mild symptoms. The decision to treat your enlarged prostate is a choice that you should make with your doctor, who can help you decide what to do about your enlarged prostate symptoms.

WHAT TREATMENTS ARE AVAILABLE FOR AN ENLARGED PROSTATE?

"Watchful waiting" is one of your treatment choices. Watchful waiting includes learning about your enlarged prostate gland and keeping track of changes that may indicate you need medicine or surgery. Because the symptoms of an enlarged prostate are not usually dangerous and may improve with time, and the benefits of treatment may be limited, watchful waiting may be a safe plan for you to follow with your doctor.

Among non-prescription options, **Saw Palmetto** (160 mg tabs, 1 tab twice daily) has modest efficacy.

Two types of prescription medicines are available to treat an enlarged prostate:

1. **Alpha blockers** (such as **doxazosin** (Cardura), **terazosin** (Hytrin), **tamsulosin** (Flomax), **alfuzosin** (Uroxatral), or **silodoxin** (Rapaflo) may help ease the tightness of the sphincter controlling urine flow out of the bladder and thereby reduce symptoms. These medications work promptly and well for about 75% of men. Sometimes this kind of medicine causes low blood pressure, lightheadedness, fatigue, retrograde ejaculation, or nasal congestion. The side effects may make it necessary to stop taking the drug.
2. **5-alpha reductase inhibitors** (such as **finasteride** (Proscar) or **dutasteride** (Avodart)) or may also be helpful. These medications relieve symptoms in about 60% of men. They cause moderate shrinking of the prostate gland, but it may take 3-6 months to work. Side effects of these medicines include decreased sexual interest, reduced erection and ejaculation.

Combining the two therapies may be more effective than either treatment alone.

WHAT ABOUT SURGERY?

If you continue to have trouble urinating, frequent urinary tract infections or blood in your urine, your doctor may recommend surgery. You and your doctor may also consider surgery if your symptoms are a big problem in your life. Surgery is an effective treatment for an enlarged prostate. Surgery has a higher risk of complications than drug therapy. Most men who have surgery do not have major problems after surgery. There are many different surgical procedures, and some experimental ones. Here are the most common:

1. **TURP** (transurethral resection of the prostate), is the most common, in which your surgeon passes a special instrument through the urethra (urine channel) to remove some prostate tissue.
2. **TUIP** (transurethral incision of the prostate), is a procedure in which the surgeon makes cuts in the prostate gland without removing any tissue.
3. **Open prostatectomy** is yet another type of surgery on the prostate gland. In this operation, an incision is made in the abdomen, and the entire gland is removed.

In most surgeries, you will have general anesthesia and spend some time in the hospital. Urine leakage, loss of erections, and urinary tract infections are rare complications of some of these procedures. Please consult with an Urologist for more details.