

# Enlarged Prostate

(Benign Prostatic Hyperplasia)



**Patient Booklet**

# What Is an Enlarged Prostate?

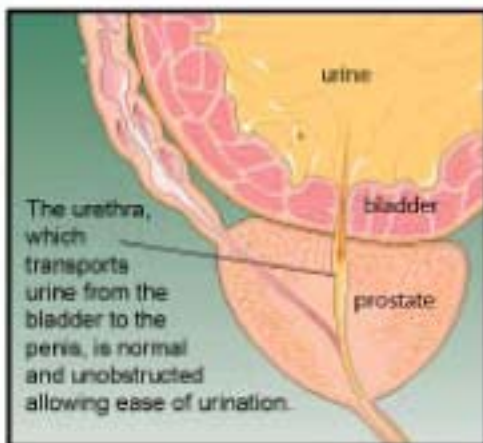
An Enlarged Prostate, in older men, is called benign (not harmful) prostatic hypertrophy (prostate enlargement), generally known as BPH. Benign means that it is not harmful.

The prostate gland forms part of the male reproductive system and is situated around the first part of the urethra immediately below the neck of the bladder. One of its functions is to produce fluid which forms part of the semen (fluid containing male sperm).

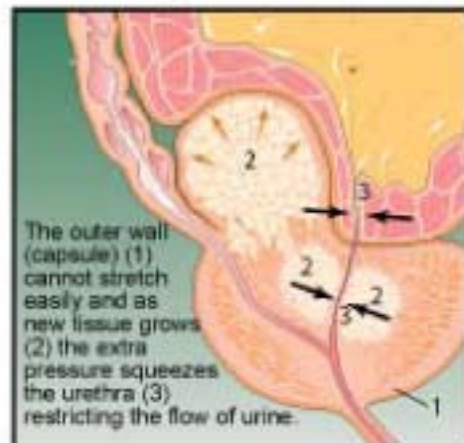
This enlargement obstructs the neck of the bladder making urination (passing water) difficult and painful and, left untreated, can lead to kidney damage, bladder stones, and incontinence (the loss of urination control).

BPH is not a disease, it is a treatable condition that is part of the natural aging process.

## Normal Prostate



## Enlarged Prostate



## What Causes BPH?

There is no clear cause of this condition, but it is generally thought that it is related to hormone activity in the cells of the gland.

The first real growth of the prostate takes place over a period of about 12 months, at the time of puberty, and is probably related to levels of the sex hormone, testosterone. During the third decade there is some enlargement, then nothing until 45-50 years of age when it may either undergo benign hypertrophy (increasing in size until death) or may undergo progressive atrophy (decreasing in size).

BPH rarely causes problems before the age of 40, but more than 50% of men in their sixties, and as many as 90% in their seventies and eighties, have some symptoms of BPH.

## Recognizing the Symptoms

Many people feel uncomfortable talking about the prostate because it has a role in both sex and urination. Recognizing the early symptoms can prevent further complications from developing.

**The symptoms vary and can include:**

- A slow, interrupted and weak urine flow
- Urgency in the need to urinate
- Leaking or dribbling before or after urination
- The need to urinate frequently, especially at night
- Difficulty in starting the urine flow



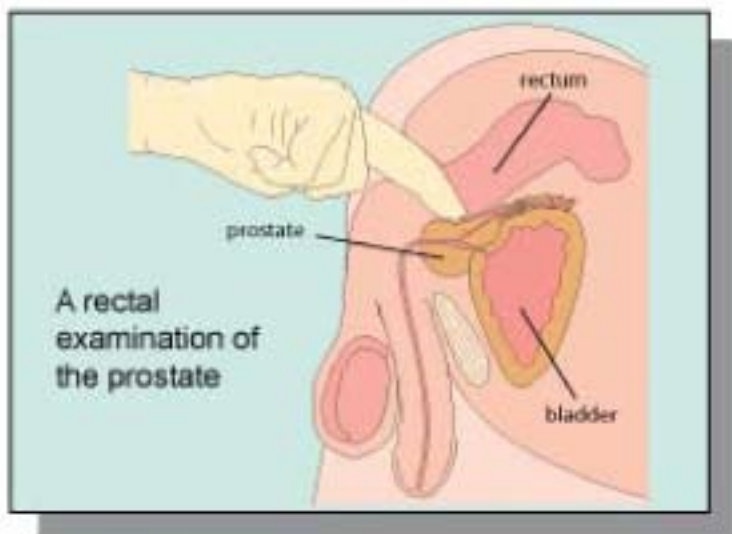
Sometimes there are no early warning signs of the problem. A man can suddenly find himself unable to urinate (acute urinary retention) and in considerable pain. This can be brought on by some cold or allergy medicines, alcohol, or cold temperatures.

## Diagnosing the Condition

On suspicion of BPH, a doctor may ask the patient to recall and rate symptoms they may have experienced over the previous month. This will provide a good overview of the condition.

The second step is a rectal (back-passage) examination which enables the doctor to assess the size and general condition of the prostate.

A test of urine and blood (PSA test) may also be useful.



**Other tests may be carried out by a specialist (urologist) including:**

- Urine flow test - using an electronic meter
- X-ray - of the urinary tract
- Echography - ultrasound image of the prostate
- Cystoscopy - inspection of the urethra and bladder
- A biopsy may also be needed to remove samples of tissue from the prostate.



## Self Help

### Drinking Pattern

Drink small sips of fluid (preferably water) each day.

When a bathroom is not within easy reach, it is less fluid to avoid the urgent need to urinate.

Drinking large quantities of fluid before going to bed should be avoided.

Drink coffee, tea, and alcohol in smaller quantities as they will increase urine volume.

Always drinking enough liquid does not lead to kidney damage.



### Urination Pattern

Perform urination as soon as there is a need and do not force the flow. Urination should take place regularly.

After urination, make another attempt to empty the bladder completely.

### Sitting Posture

Avoid sitting on improperly adjusted seats which can strain the prostate.

### Diet/Exercise

Avoid eating processed and cold medicines with anticholinergic properties.

Once the problem is under control, it will be possible to return to a normal lifestyle. Pelvic floor exercises may be recommended following surgery to maintain strength of the bladder muscle.

A regular improvement should be noticed in urinating patterns. Urinate regularly can become when you are free of the symptoms.

A balanced diet, plenty of exercise, and leisure activities will help maintain a healthy lifestyle.



## Treatment and Medications

In men with mild BPH, 33% need no treatment and the condition poses no health threat. Sometimes, the condition causes a risk of further complications, especially in men with enlarged prostates, and the risk of Acute Urinary Retention (AUR) or need for operation is increased.

Surgery may be required if the condition cannot be controlled with medication.

Inflammation of the prostate (Prostatitis) may involve severe and persistent pain, and some bleeding.

When this is present, the inflammation must be treated before any surgical procedure can begin.

All drugs can be grouped together by how they work (ie, their specific mode of action). The list below includes all the different types of drugs approved for use in the treatment of this condition at the time of publication. (Updated information is also available online at: [www.diseases-explained.com](http://www.diseases-explained.com).)

Always consult your healthcare provider if you have any questions or concerns about the medication you have been prescribed.

### Drug Type

### Effects

(In alphabetical order)

**5-Alpha Reductase Inhibitors (5-ARIs)**

Inhibit the production of the hormone (DHT) which is involved in prostate enlargement, causing the gland to shrink. Most can

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## Surgical Treatment

### Transurethral Resection of the Prostate (TURP)

An instrument called a resectoscope is inserted through the urethra and removes obstructing tissue which is then carried into the bladder. Although this operation is delicate, transurethral procedures are less traumatic than open forms of surgery and require a shorter recovery period.

### Open Prostatectomy (Retropubic Prostatectomy)

An incision is made through the abdomen and through the capsule containing the gland. Tissue is removed by hand. A tube is inserted to drain fluid from the incision area and a catheter drains urine until the wound is healed.

### Urethral Stent / Balloon Urethroplasty

A stent (slender tube) or balloon (inflatable tube) is inserted into the urethra to widen the vessel where it is obstructed.

### Transurethral Radio-Frequency (TURF)

Heat in the form of radiowaves (similar to microwaves) reduces the blockage to the urethra with little damage to other tissue.

## Other Treatment

For some people, herbal treatments may have a beneficial effect.

## Excusive SA agent in:

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