

# Transurethral resection of the prostate (TURP)

For patients at UW Medical Center - Northwest

This handout describes a transurethral resection of the prostate. It also gives instructions to follow before and after your surgery.



Scan with your phone camera for a digital copy of this handout.

## What is transurethral resection of the prostate?

A transurethral resection of the prostate (TURP) is a type of surgery. It is done to treat urinary symptoms caused by an enlarged prostate gland (*benign prostatic hyperplasia*, or BPH).

The goal of a TURP is to make it easier for you to pee (urinate). During surgery, your surgeon will remove part of your prostate gland. This creates a wider channel for urine to flow. After TURP, urine will move more easily from your bladder, through your prostate, and into your *urethra* (the tube that urine goes through when it leaves your body).

## When is a TURP needed?

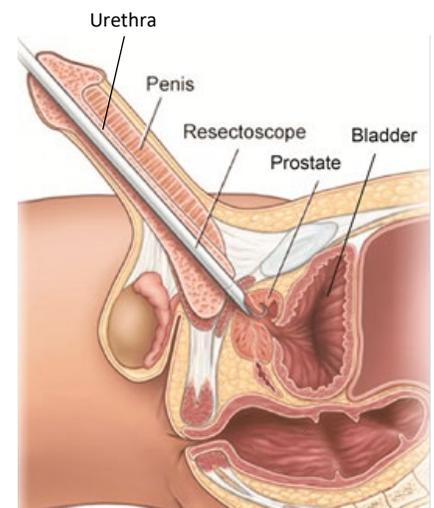
You do not need this surgery if your BPH is not causing any urinary symptoms. But BPH can cause these symptoms for some men:

- Needing to urinate often or urgently
- Problems starting urination, slow urination, or not being able to urinate
- Needing to urinate often at night (*nocturia*)
- Having to stop and start again while urinating
- Feeling like you can't empty your bladder all the way
- Urinary tract infections

If your BPH is causing urinary problems, your healthcare provider may:

- Suggest behavioral changes, such as drinking less fluid before going to bed
- Prescribe medicines to relax the channel that goes through the prostate or to shrink the prostate so it does not block the urine flow

If these options do not work well for you, or you do not want to take medicines every day, your provider may advise that you have a TURP.



**During a TURP, a device called a resectoscope is passed through the urethra and into the prostate.**

## What happens during a TURP?

A TURP may be done using:

- *General anesthesia*, which puts you to sleep during the surgery
- *Spinal anesthesia*, where a numbing medicine is injected into your back to numb the surgery area

During the TURP, your surgeon will pass an instrument called a *resectoscope* through your urethra up to your prostate and bladder. Your surgeon will use the resectoscope to:

- Check your bladder for any problems
- Remove parts of the prostate gland that are blocking urine flow
- Use heat (cautery) to seal off blood vessels after removing part of your prostate

A TURP usually takes less than 90 minutes.

## How do I prepare for surgery?

### 7 Days Before

Some drugs may cause excess bleeding during and after your surgery. For 7 days before your surgery, unless your provider tells you otherwise, do **not** take any aspirin or aspirin-like drugs such as ibuprofen (Motrin, Advil, and others) or naproxen (Aleve, Naprosyn, and others).

### Fasting

Follow the fasting instructions you were given. **After midnight the night before surgery, do not eat or drink anything.**

## After Surgery

- You will most likely stay overnight in the hospital.
- You should be able to eat regular food.
- You will have a thin tube called a *catheter* in your urethra to carry urine out of your body.
- You should have very little pain, but you may have some discomfort from the catheter.
- You will be on an irrigation system that helps flush blood from your bladder. You may notice a large bag of fluid hanging by your bed. This is your urine bag. It will be emptied often.

## Voiding Trial

We need to make sure you can urinate normally before you leave the hospital. In most cases, the day you go home, which is usually the day after surgery, we will do a *voiding trial*. For this trial:

- We will fill your bladder with fluid through a *Foley catheter* (a thin, flexible tube) and then remove your catheter so that you can urinate.
- The urine that you pass after we remove the catheter will contain some blood, even if the urine you passed earlier was clear.
- If you cannot urinate after we remove the catheter, you will go home with the catheter in place. This is more common for men who wore a catheter before their TURP. You will be instructed when to return to the clinic for a voiding trial or to have the catheter removed.

## For Your Safety

The medicine you receive during surgery will make it hard to think clearly. It can take 24 to 48 hours for all the effects of the medicine to go away. **For your safety, for 24 hours after you leave the hospital:**

- Do not drive or use machinery.
- Do not drink alcohol.
- Do not make any important decisions, sign any legal documents, or be responsible for anyone else's care.

## What to Expect After Surgery

- It is normal to have blood in your urine after a TURP. This usually lasts for 1 to 2 weeks after the surgery, but it can last up to 6 weeks. Your urine may appear light pink in color to bright red, like Kool-Aid or Hawaiian Punch. Drink plenty of water to stay hydrated and to help flush any blood out of your urinary system.
- The area where the bladder meets the urethra will be raw after surgery. This can cause some urinary *urgency*, where you feel like you have to rush to the bathroom. You may have some leakage of urine as well. This is worst right after surgery. It will ease over the next 2 to 4 weeks.
- For the first few days after surgery, be sure you know where the nearest bathrooms are when you are away from home.

## Short-term Risks

These short-term risks may occur after having TURP surgery:

- Heavy bleeding
- Urinary tract infection

## Long-term Risks

- TURP is linked with *retrograde ejaculation*. In this condition, semen released during sexual climax (ejaculation) enters your bladder instead of exiting the penis. This is not harmful and usually does not affect sexual pleasure. But it can interfere with your ability to father a child. This occurs in about 75% of men (75 out of 100 men) who have TURP.
- TURP is not usually linked with loss of erections or *stress urinary incontinence* (leaking urine when you cough or sneeze). But some men may have urinary leaks when they feel urgency.
- There is also a chance that a *contracture* of the urethra may occur months or years after a TURP. This means that some scar tissue may form and make the urethra narrow again. If this happens, you may need to have another surgery to fix this problem.

## Self-care at Home

### Fluids and Food

For 24 hours after you leave the hospital:

- Drink plenty of water to stay hydrated and to help flush any blood out of your urinary system.
- Do not eat any heavy or large meals.
- Avoid spicy and greasy foods.
- Resume eating your normal foods as you are able to handle them.

### Pain Medicine

- For mild discomfort or moderate pain after surgery, take acetaminophen (Tylenol).
- Most men do not need prescription pain medicine after a TURP. But some doctors prescribe strong narcotic pain medication. If you take this, always take it with food so that you do not get an upset stomach. Consider adding a gentle laxative, such as Miralax, to help with constipation.
- Do **not** drive while you are taking prescription pain medicine.

### Activities to Avoid

For 2 weeks after surgery:

- Avoid lifting anything that weighs 10 pounds or more (for example, a gallon of milk weighs almost 9 pounds).
- Avoid doing anything that causes you to strain, including pushing due to constipation (see “Constipation” handout).
- Avoid jogging or other strenuous exercise that causes you to strain your abdominal or pelvic muscles.
- Do **not** engage in sexual activity.

You may return to most work 1 week after surgery. But, if your job requires you to lift more than 10 pounds, arrange to do lighter duty or take 2 weeks off.

## When to Call

For 2 to 4 weeks after your TURP, it is normal to have blood in your urine and to feel burning at the tip of your penis when you urinate. But, if you pass blood clots or still have blood in your urine 4 weeks after surgery, call the General Urology clinic at 206.668.5215. The center is open weekdays from 8 a.m. to 5 p.m.

Also call the General Urology clinic during open hours if you are concerned about any of your symptoms, or if you have:

- Fever higher than 101°F (38.3°C)
- Shaking and chills
- Nausea and vomiting
- Skin reactions, such as hives or a rash

**If you need help after hours or on weekends or holidays, the phone number (206.668.5215) will connect to the after-hours nurse triage. For urgent needs after hours, you may also go to the Emergency Room.**

### Questions?

Your questions are important. Call or send a MyChart message (non-urgent concerns only) to your doctor or healthcare provider if you have questions or concerns.

Weekdays from 8:00 a.m. to 5 p.m., call the General Urology Clinic at 206.668.5215.

After hours and on weekends or holidays:

- If you need urgent care, go to the Emergency Room.
- If you have questions, call 206.668.5215 to be connected to the triage nurse