

Having prostate surgery

Urology department



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The most common operation on the prostate is known as a Transurethral Resection of the Prostate (TURP).

Sometimes, it is necessary to make a cut in the bladder neck as well as, or instead of, doing the prostate operation.

The operation is done under general or spinal anaesthetic and involves passing a narrow telescope up the penis. This allows the surgeon to see the prostate and to examine the inside of the bladder.

Using heat from an electric current, pieces of prostate are removed in slices until the obstructing part is removed. These pieces are then washed out down the telescope and sent away for examination.

The operation involves a short stay in hospital, usually for two to three days.

In a small number of people, the prostate is too large to be removed by the TURP, so an operation which requires a cut in the lower abdomen is done. The stay in hospital is then a little longer, between five and seven days.

You will be warned beforehand if this is thought to be likely.

The operations have the same effect of removing the obstruction making it easier for you to pass urine.

Many men are worried about the effect of prostate surgery on their sex life. If you have normal erections now they are unlikely to change after the operation. However, if the strength of your erections is declining, this may get worse after prostate surgery.

You may also notice that your orgasm becomes dry. This is because the widened channel through the prostate allows the sperm/ semen to fall back into the bladder instead of coming down the penis. It is then passed out when you next pass urine.

If you are particularly concerned about the effects of surgery on your sex life, please feel free to discuss this with the doctor.

Some men will have a more urgent and frequent need to pass urine in the first days and weeks after the operation; control may also be less effective than before the operation.

In most people, these symptoms eventually settle down but in a small number the symptoms may never completely resolve.

Regrowth of the prostate requiring a further operation after a number of years occurs in approximately ten per cent of men.

Narrowing of the urethra (water pipe) may also occur in a small number of men.

Overall, most men are happy with the result of the operation and studies have shown a good outcome in 80 per cent.

After the operation

After your operation you will have a catheter going up the penis into the bladder which will be irrigated by a salt solution to wash out blood and clots.

The urine in the catheter bag will be blood stained at first but this will gradually get better.

You will also have a drip going into one of your arms to provide you with fluid until you are eating and drinking normally (quite often, this is the same day).

The catheter is usually removed between 24 and 72 hours after the operation. You may not have perfect control of your urine immediately and you may feel a constant urge to pass water but this should improve with time.

Going home after the operation

You are likely to see blood or small clots in the urine at first which will gradually clear but may reappear after ten days or so. If this happens, don't worry, just drink more fluids to flush out the system. However, if bleeding becomes heavy, you should contact your own doctor.

You should gradually increase your activity so that by the end of a month you are back to normal.

If you work, you may return to work after two weeks if your job is fairly sedentary. If your work is heavier in nature, you may need to wait for up to 4 weeks.

You should not have sex for two weeks after the operation. After this time, you should be able to resume normal sexual activity.

Follow up after the operation

In most cases, a follow up appointment after prostate surgery is not necessary.

About three to four weeks after your operation, you will be telephoned by the urology nurse. This gives you an opportunity to let us know how you are getting on. If there are no problems, no further follow up appointment will be arranged.

If there is anything bothering you, sometimes simple reassurance is all that is required. In a few cases, the nurse will recommend a visit to outpatients so that any problems can be thoroughly assessed.

The nurse will try to contact you on a number of occasions, If she is unsuccessful and you have something you would like to discuss, you may contact her by telephoning 01935 384 394.

If you do not have a phone, then you will be made an outpatient appointment.

At the operation, any prostate tissue removed is sent to be looked at under the microscope. The nurse will also let you know the result of this test.

Occasionally, malignant (cancer) cells are found which were not suspected. If this is the case, the nurse will contact you to discuss this and will also make an appointment for you to see a senior doctor.

In many cases, the doctor may suggest simply keeping an eye on things as prostate cancer is not uncommon in older men and may never cause problems.

After a prostate operation, it may take some months for urinary symptoms to settle down. If, after three months, you have symptoms of going to the toilet frequently or having to rush to get to the toilet in time or there is anything else to do with your operation which is bothering you, then do ring the urology nurse to discuss things.

If you would like this leaflet in another format or in a different language, please ask a member of staff.

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