Urolift

**Item Number:**

**Minimal invasive management for the relief of LUTS (lower urinary tract symptoms)**

  

Why is it done?

 This procedure is performed when the prostate gland is causing LUTS and you want an alternative to medication without the complications of a permanent procedure.

 Symptoms include: a weak stream, nightly urination, frequent urination, inability to urinate, **(LUTS)** kidney failure due to the obstruction, bladder stones, recurrent bladder infections.

 Medication such as Flomaxtra, Urorec, Minipress etc. should always be given as a first resort.

 This is alternative to medication where ejaculatory function is to be preserved.

 Prostate cancer first needs to be ruled out by doing a PSA, and when indicated, with a 3T MRI scan of the prostate with an abnormal PSA with a possible prostate biopsy of any suspicious lesions.

 Usually a trial of alpha blockers would been attempted

 **Prostate sizes up to 80-100 cc with NO midlobe.**

How is it done?

 Patients will receive a general anaesthesia, unless contra-indicated.

 A cystoscopy is performed by placing a camera in the urethra with the help of a lubricant jelly and an irrigant fluid.

 The inside of the bladder is viewed for pathology. If any suspicious lesions are seen, a biopsy will be taken.

 The device is placed through the cystoscopic sheath.

 Prostate lobes are drawn apart similar to opening a curtain.

 Occasionally a Bladder Neck Incision may be done if the bladder neck is too narrow.

 Prophylactic antibiotics will be given to prevent any infections.

 

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Complications

**Side–effects**

 Ejaculation will not be affected as with medication, TURP and TUVP, therefore no retrograde ejaculation, thus preserving sexual function

 Fertility is no guaranteed. If it is an issue, DON’T DO IT!.

 No Stress incontinence especially in the elderly and the diabetic patients

 May experience a slower stream initially due to swelling

 Some urgency symptoms

 Possible infection due to cystoscopy (<2%)

 Rare cases of stone formation on clips.

 Further enlargement of prostate lobes within 3-5 years requiring a definite procedure.

 NB! Each person is unique and for this reason symptoms vary!

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