Enlarged prostate: what treatments are there?

As men get older their prostate can get bigger. This can cause problems, such as having to get up at night to urinate. But an enlarged prostate isn’t usually a serious health problem. So after talking with your doctor you might choose to wait before deciding to have any treatment.

When men have an enlarged prostate doctors sometimes call it 'benign prostatic hyperplasia', or BPH for short. You might also hear it called 'lower urinary tract symptoms', or LUTS for short.

We’ve looked at the most up-to-date research to produce this information. You can use it to talk to your doctor and decide which treatments are right for you.

What treatments work?

There are several treatments for BPH, including herbal products, medicines, and surgery. The treatments your doctor suggests will usually depend on how much your symptoms bother you.

If you don’t find your symptoms too troublesome your doctor may suggest that you try 'watchful waiting'. This means that you and your doctor keep a close eye on your symptoms, but you don’t have any treatment for the time being.

You can decide to have treatment for BPH at any time.

Medicines

There are several types of medicines for treating BPH. If one type doesn’t help you, you may be treated with more than one.

- Alpha-blockers work by relaxing the muscles in your prostate and bladder. This makes it easier for you to urinate. There’s good research to show alpha-blockers help reduce symptoms of BPH. Your symptoms should start to get better after about two to three weeks. Possible side effects of alpha-blockers include tiredness, feeling
light-headed when you stand up, and headaches. They can also cause dry climax during sex (you don't ejaculate when you have an orgasm), although this may be temporary.

- **5-alpha reductase inhibitors** work by blocking hormones that help the prostate grow. But they take a few months to work. Research suggests that they may help reduce the size of your prostate by about one third. This should make it easier to pass urine. They can also reduce your chances of suddenly being unable to pass urine, a condition that needs to be treated urgently, usually with surgery.

  Side effects of these drugs can include problems getting an erection, premature ejaculation, and dry climax. Men who are planning to father a child shouldn't take these drugs, as they can cause birth defects. Women who are breastfeeding or pregnant shouldn't handle the tablets. Sexually active men should use condoms if there is a chance their partner could become pregnant.

- **Non-steroidal anti-inflammatory drugs (NSAIDs)** work by reducing inflammation (swelling). You may have heard of some of the commonly used ones such as aspirin and ibuprofen. Some NSAIDs are not suitable for people with heart problems or for people who have gastro-intestinal problems (problems with the stomach and digestive system), as they can cause gastro-intestinal bleeding.

- **Phosphodiesterase-5 (PDE-5) inhibitors.** You may have heard of these drugs, especially one called sildenafil (Viagra) being used for treating erection problems. But they can also help with BPH symptoms. Doctors might suggest these medicines for people whose symptoms include erection problems.

  Common side effects include headaches, upset stomach, or flushing (redness) in the face. More serious side effects include blurred vision or sudden loss of vision, sudden loss of hearing, chest pain, and shortness of breath. Seek medical attention straight away if you have any of these symptoms.

**Things you can do for yourself**

Your doctor might suggest some changes to your lifestyle to help relieve your symptoms. There isn't much research about these tips, but they might help.

- Avoid drinking large amounts of liquid at any one time.

- Avoid drinks altogether before going to bed.

- Reduce the amount of alcohol you drink (alcohol can stimulate your bladder).

- Cut back on coffee, tea, cola, or any other drinks that contain caffeine (caffeine can stimulate your bladder).
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- Check any medicines you are taking. Some antihistamines (drugs used to treat allergies) and some drugs used to treat depression can make your problems with urinating worse.

You may have seen herbal treatments for an enlarged prostate. You can buy these without a prescription at some health-food shops and pharmacies. They include things like rye grass pollen, *Pygeum africanum*, and saw palmetto.

You should always talk to your doctor before trying a herbal extract for an enlarged prostate. Herbal products are not regulated in the same way as medicines. They are sold as supplements without a prescription, in the same way as vitamins.

There isn't much good evidence that any of them help much, if at all, with prostate symptoms. And, like medicines, they can have side effects.

**Surgery**

The most common operation used to cut away part of the prostate is called transurethral resection of the prostate, or TURP. It removes the blockage caused by your enlarged prostate so that you can urinate more quickly and easily. Symptoms improve for 9 in 10 men who have this surgery. You may have heavy bleeding into your urine immediately after surgery. But this should pass after a few days.

About 2 in 100 men get TURP syndrome for a few days after this operation. This can make you feel slightly confused or queasy, and you might vomit. TURP syndrome can also raise your blood pressure or cause temporary problems with your sight.

TURP can also cause some other side effects:

- About 70 in 100 men get dry climax during sex

- Doctors used to think that TURP caused erection problems, but more recent research has suggested that this isn't the case. If there is a risk of erection problems with TURP it is probably a small one

- Some men need another operation in the future because their prostate gets bigger again.

**Other types of surgery**

There are several other surgical procedures used to treat symptoms of BPH. Some of them are less invasive than TURP, which means that your stay in hospital will probably be shorter and there is less chance of complications.

Some of these treatments are fairly new compared with TURP. Some people might choose them because they are less invasive. But we're still not sure about how well they relieve symptoms in the longer term compared with TURP.
It's also worth remembering that these newer treatments are not available everywhere. Your choice of available treatments is likely to vary between hospitals.

**Transurethral microwave thermotherapy (TUMT)** is a procedure that uses microwaves to destroy prostate tissue without damaging other tissues. A tube called a catheter is passed up through the opening of the penis (urethra). Then a small antenna at the end of the catheter emits microwaves that attack the prostate. This procedure can be done as an outpatient treatment and usually takes between one and two hours.

**Transurethral holmium laser enucleation of the prostate (HoLEP)** uses a similar method to TUMT, but this time a small laser is passed up the urethra. When the laser reaches your prostate it's used to cut away some of the prostate tissue.

**Transurethral vaporisation of the prostate (TUVP)** also involves passing an instrument through the urethra. This instrument is moved over the surface of your prostate. It uses an electric current to heat the tissue and burn it away. This current also seals the blood vessels and stops bleeding.

**Transurethral incision of the prostate (TUIP)** involves an instrument called a resectoscope being put into the urethra and up to the prostate. The resectoscope makes one or two small cuts in your prostate at the area where it meets your bladder. These cuts reduce the pressure on the opening of your bladder and make it easier for you to urinate.

**How do I decide which treatment is right for me?**

You may want to ask yourself some questions:

- How bad are my symptoms? If they are affecting your life then you may want to consider treatment. But men with mild symptoms often don’t get any worse for many years and prefer to wait to see what happens.

- Do I want to take tablets every day? You may need to take these for a while before you get any results, and after a few years you may need surgery anyway.

- Do I want a permanent and quick solution? If you’re not happy to wait a few months to see if a drug treatment helps, then you may be better off opting for surgery. Also, remember that some men who take drug treatment end up needing surgery. But surgery also has side effects.