

Surgery

Surgery may be an option to remove the enlarged part of the prostate and help relieve symptoms including TURP and TUIP as well as the newer laser treatments of Green Light Laser and Holmium Laser Enucleation of the prostate.

After treatment.....what will happen?

Symptoms should improve. The GP, Urologist or specialist nurse will want to keep a check on you, your symptoms and treatment.

Changing things in your lifestyle

A healthier lifestyle can only be good for you! As BPH is more common in men who are very overweight now is a good time to think about shedding those extra pounds.

Healthier diet

Try cutting down on sugar, sweet foods, sweets, chocolate, biscuits, cakes and puddings.
Try cutting down on chips, fried foods, crisps and takeaways.
Have at least 5 portions of fruit and vegetables each day in a variety of colours.

Drinks

Cut down on caffeine. This is found in tea, green tea, coffee and cola drinks. Remember energy and performance drinks or energy shots can have high amounts of caffeine added.
Don't drink too much before bedtime
Limit alcohol intake as this can be an irritant.
Unless told otherwise, keep within recommended limits and try to have a couple of alcohol free days each week.

Keeping active



Try to take moderate physical exercise at least 5 times a week. This could be as simple as walking 30 minutes every day. If you haven't exercised for a long time, check with your GP and build up gradually.

Smoking

If you smoke the best advice is to give up! Although smoking does not cause prostate disease directly, it has a harmful effect on the body.

A word for partners.....

If you recognise the symptoms in someone you are close to then the sooner he is checked out the better. Symptoms can be helped and treatment started. Usually his quality of life can be made so much better again. So:

-  Persuade him to make an appointment to see his GP or make it for him and go with him
-  Get him to take the symptom self-test at www.prostatescotland.org.uk

For more information we have a fuller leaflets on BPH and the PSA test available that can be downloaded from our website

The information contained in this leaflet has been developed by Prostate Scotland and reviewed by its Advisory Group of doctors, nurses and patients. This leaflet is not intended to replace medical advice or seeing a doctor for specific illnesses or symptoms.





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Men and their plumbing!

-  Going again?
-  Caught short?
-  Going all night?
-  Can't go?

Sound familiar?

This could be a sign of BPH
Benign Prostatic Hyperplasia
or Enlargement

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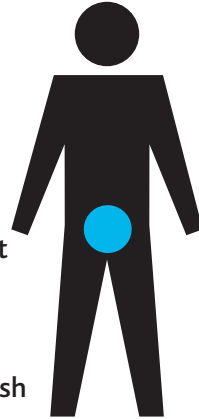


What is the prostate?

Only men have a prostate and it is usually about the size of a walnut. Around the age of 40 it starts to grow or enlarge and this may cause problems for a man when passing urine or not being able to pass urine.

Where is it?

The prostate is inside the pelvis, just below the bladder and in front of the back passage. It wraps around the tube (urethra) that allows urine to flow out of the bladder and for semen to pass out through the penis.



What does the prostate do?

It supplies the fluid to protect and nourish sperm during intercourse.

It also makes Prostate Specific Antigen, called PSA.

So what is BPH or BPE?

After the age of 40, the prostate begins to get bigger or enlarge. When this starts to cause problems in passing urine or not being able to pass urine doctors call this Benign Prostatic Hyperplasia (BPH) or Benign Prostatic Enlargement (BPE)

It is a common problem as almost 1 in 2 men over 50 are affected by prostate disease.

Having to go to the toilet fast

Passing urine more often than before during the day and more often during the night

Is this like you or someone you know?

Taking longer to empty the bladder with a weak dribbly flow of urine

Planning journeys knowing where there are toilets on the way





If this sounds familiar then it is time to make an appointment to see your GP

Why?

Your GP may be able to help with these symptoms, improve your quality of life and let you get back to the things you enjoy doing - without worrying about where the nearest toilet is!

What will happen at the doctors?

The doctor will ask how you are feeling and some questions about passing urine. Such as:

-  How often you go to the toilet in less than 2 hours between trips
-  How often you 'stop and start' when passing urine
-  How often you have a feeling of not emptying the bladder completely
-  How many times you pass urine during the night

Keeping a diary of visits to the loo until you see the doctor would be very helpful. There is also a symptom self-test on our website which you can do. This will not give a diagnosis but indicates the severity of your symptoms.

www.prostatescotland.org.uk

What tests might the GP do?

Urine sample

This will be checked for blood, glucose (a type of sugar) or any signs of infection in the bladder or kidneys.

Digital Rectal Examination (called a DRE)

Because the prostate cannot be seen or checked from outside the body, one of the first examinations the doctor will do is a DRE.

The doctor slides a gloved finger into the back passage to feel the shape, size and condition of the prostate.

This is a straight forward procedure to help the doctor decide what may be the best for you.

But it is an examination that worries some men. Although it may be embarrassing or a bit uncomfortable, the doctor has done this many times before and understands how you might be feeling.

Blood tests

PSA (Prostate Specific Antigen) test.

PSA is made only in the prostate. Because some PSA leaks out of the prostate, it's normal to find PSA in a man's blood. This is called the PSA level.

As a man gets older or if the prostate is damaged or enlarged then more PSA can leak out into the blood so giving a higher PSA level.

A word about the PSA test.

At the moment, the PSA test is the best test available to check for any diseases in the prostate.

However, it is not perfect. There are benefits but there are also drawbacks in having this test. It is best used as a guide for the doctor to make a diagnosis on what might be going on.

For more information on the PSA test or to download leaflets on PSA, check out our website www.prostatescotland.org.uk to help you decide whether or not to have a PSA test.

Talking this over with your GP can also help

Another blood test which may be done is to check that your kidneys are working properly.

If it is BPH, can it be treated?

Yes it can. There are a number of treatments which your GP will talk to you about.

Medication

Your doctor may prescribe a medication. These medicines don't cure BPH but help deal with the symptoms.

There is a medicine that you can buy over-the-counter but speak to your pharmacist before buying this. The pharmacist may ask about your symptoms and other medicines that you take to make sure this medication is right for you. You may also be advised to see your GP at a later date.

Medication will not relieve symptoms for all men. So you may be referred to a specialist, called a Urologist.

