



[Prostatectomy: Robotic assisted radical prostatectomy \(RARP\) and Laparoscopic radical prostatectomy \(LRP\) for prostate cancer; and COVID-19](#)

The correct name for the virus is SARS-coronavirus-2 and the disease it causes is Coronavirus Disease 2019 (COVID-19). SARS means Severe Acute Respiratory Syndrome. Throughout the document this new (novel) disease will be referred to as [COVID-19](#).

This document is intended to provide general information and is not intended to replace medical advice. Prostate Scotland **cannot give individual advice or recommend which treatments might be suitable for an individual or recommend individual medical care or health professionals** – patients should always check with their urologist, oncologist, CNS or GP regarding treatments. As the following is general information, guidance and procedures for each health board may be slightly different. If you have been given specific advice from your urologist, oncologist, CNS or GP then you should always follow their advice.

We have compiled this information on COVID-19 and [Robotic assisted radical prostatectomy \(RARP\) and Laparoscopic radical prostatectomy \(LRP\) for prostate cancer](#) to the best of our knowledge and understanding at the present time. As the situation is constantly changing, almost on a daily basis, and as more knowledge and information become available, this information and guidance may change. We aim to keep you as up to date as possible.

Routine operations have been cancelled, but **some** cancer surgery is continuing. However, there are differences between health boards depending on availability of resources. The situation is constantly changing, and it is best to contact your urologist, oncologist or CNS who can advise on what is happening in your area

Your cancer treatment plan is individual to you. In all cases, it is important to think about the risks and benefits. Some cancer treatments make it more difficult to fight infection so there is a potential increased risk of infection with [COVID-19](#).

However, some men with [prostate cancer](#), due to age ie those over 70 and those with additional conditions such as diabetes, heart disease maybe more at risk of severe symptoms if they catch [COVID-19](#).

Your urologist may want to [review](#) your treatment plan with you to ensure it still best suits your needs and discuss any changes that may be appropriate. This will only ever be done to reduce overall risk and harm.

Your urologist and GP will try to minimise the amount of time you spend in hospital departments and at the [GP practice](#); for example, arranging telephone consultations and offering blood tests at a different NHS site. Make sure everyone involved in your care and treatment has your up-to-date contact details.

Certain treatments for cancer can affect how well the immune system works. In particular, this may be the case for those men having [chemotherapy](#) treatments for their [prostate cancer](#). Their immune system may be affected and not work so well during their treatment and for a number of weeks or months afterwards. Those having treatment(s) over a number of months may be at a greater risk of developing more severe complications if they contract [COVID-19](#) (or indeed colds, 'flu or tummy bugs) during their treatment.

Some people with specific cancers are on the 'very vulnerable list' (those who are shielding) should receive a letter from NHS Scotland outlining more specific advice to keep themselves safe. <https://www.nhsinform.scot/illnesses-and-conditions/infections-and-poisoning/coronavirus-covid-19/coronavirus-covid-19-shielding>

Who can I contact?

Potentially your best point of contact for information in your particular circumstances will be your Clinical Nurse Specialist (CNS). As you will understand, NHS staff are under a great deal of pressure at the moment and you may not get through to speak to the CNS straight away. You may be asked to leave your name and telephone number so a member of staff can call you back or they may advise on an email address that you can reach the person on.

If you attend your [GP practice](#) for follow-up and treatments for your [prostate cancer](#) then the GP or Practice Nurse may be the best person to contact. Again, you may be asked to leave your name and telephone number so a member of staff can call you back.

If your urologist, oncologist, CNS, GP or someone from the NHS is trying to get in touch with you, this may show on your phone as 'number withheld'. It may be best to answer 'number withheld' calls in this current situation, especially if you have left your name and number for a call back. They will let you know straight away who is calling.

You may receive a text from NHSNoReply. These are usually texts to give you information and don't allow you to get back in touch.

Another very helpful source of information is this leaflet produced by the Scottish Government: <https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2020/03/coronavirus-covid-19-tailored-advice-for-those-who-live-with-specific-medical-conditions/documents/cancer/cancer/govscot%3Adocument/Cancer%2BPatient%2BInfo%2Bguidance%2B-%2B090420.pdf>

What is the policy about treatment currently?

NHS Scotland and the Scottish Government have stated that the NHS will continue to provide vital cancer treatments, and emergency and urgent care for all patients. If it becomes necessary, it will **prioritise** some patients for treatment based on need.

If you are being treated with [RARP or LRP](#), individual [decisions](#) based on the benefits and risks of treatment may have to be made with you as the rate of [COVID-19](#) infection in the community rises. Different therapy options involving fewer visits to hospital may be offered to you. A lot of surgical procedures may now carry far greater risks due to [COVID-19](#). Because of this, other treatment plans may be proposed and discussed with you.

Shielding – what is it, why is it essential and the recent change to this guidance

Please note. You can see the latest Scottish Government guidance on '[shielding](#)' You can also download the 2 page PDF route map on shielding.

On the 23rd July 2020, the Scottish Government announced that [shielding](#) is to be paused from **1.8.20**. You should receive a letter or SMS text message confirming the latest changes announced and that shielding is to be paused.

Some additional changes have now been announced to the original guidance on [shielding](#)

[As from 24.7.20](#) a number of changes were announced to the guidance on [shielding](#).

This includes being able to meet with up to **8** people from **2** other households each day **indoors**, being able to meet **outdoors** with up to **15** people from **4** other households, travel in a car with someone you don't live with, use public transport, go to pubs and restaurants staying in the outdoor areas, go to shops and indoor markets, go to the barbers or hairdresser and visit indoor attractions and if you live alone you can form an extended household with one other household. You should wear a face covering if you can't physically distance and face coverings are compulsory on public transport and in shops.

Continue to wash your hands with soap and water regularly especially when you get home if you've been out and about.

You can see more details in our 'Info Guidance' page on shielding [here](#).

You can also watch a video about shielding [here](#).

Further guidance about going out and about has been produced by the government:

1. A guide to help you understand what activities are safer than others can be found [here](#)
2. A tool to help you protect yourself during daily activities can be found [here](#)

A [workplace risk assessment tool](#) to help people consider their individual risk when returning to work is also available.

If you have not already registered with the SMS text service, then it may be worth considering doing so. A COVID-19 forecasting service for shielding is being developed and people who have been [shielding](#) will be informed through the SMS text service about the risk of being exposed to COVID-19 in their local area.

In the future, the Government is looking at other ways that shielding might change. As the situation changes and as more knowledge and information become available, guidance on shielding will change. We will try to keep you as up to date as possible with these changes.

For those people who are at very high risk of severe illness additional protection measures are advised which involves minimising all interaction between them and others (called shielding).

Those who are extremely vulnerable should:

- not leave their homes (please see guidance above as this has been updated)
- minimise all non-essential contact with other members of their household

For more information on shielding go to <https://www.nhsinform.scot/illnesses-and-conditions/infections-and-poisoning/coronavirus-covid-19/coronavirus-covid-19-shielding>

People who fall into this category will be contacted by the NHS by letter or email. Some people may find that they receive more than one letter if they have multiple 'shielding' conditions. 'Shielding' applies to men who are being treated by chemotherapy for their prostate cancer.

If you discover that you are not on the "very vulnerable" list and don't receive a letter, but think you should be, you should contact your GP, or you can register via the NHS111 website to receive a letter. Having this letter might be helpful in terms of getting priority for home deliveries etc.

Thank you to our NHS

We would like to take this opportunity to sincerely thank **all** NHS staff throughout Scotland who are doing a wonderful job in extremely challenging, difficult and unprecedented circumstances who have been working tirelessly to support all patients.

Although the weekly Thursday night 'Clap for our Carers' has come to an end, join the nation on **Thursday 25th March 2021 at 8pm** to celebrate our carers in the '[Clap for our Carers Day](#)' – a date to put in your diary now.

Robotic assisted radical prostatectomy (RARP) and Laparoscopic radical prostatectomy (LRP) for prostate cancer and COVID-19

If you are being treated by [radical prostatectomy](#), individual decisions based on the benefits and risks of treatment may have to be made with you as the rate of [COVID-19](#) infection in the community rises.

[Radical prostatectomy](#) means that the prostate, part of the urethra and seminal vesicles will be taken out. In some cases, if the surgeon thinks there may be cancer in the lymph nodes next to the prostate these will be taken out as well.

Radical prostatectomy can be carried out in 3 ways:

Robotic assisted radical prostatectomy (RARP)

This has rapidly become the most common minimal access approach to removing the prostate. In the operating theatre a side cart with the robot is placed next to the man on the operating table. Robotic arms are attached to the robot with the small instruments necessary to do the operation attached to the arms.

The surgeon sits at a console within the operating theatre. From this control panel she/he very precisely operates with the small instruments attached to the robot arms.

Laparoscopic radical prostatectomy (LRP)

This is also minimal access surgery but without using a robot. The difference being that the man is lying on the operating table with the urological surgeon standing beside him and directly using small instruments to perform the operation.

Open radical prostatectomy

This may be the operation recommended to some patients by some surgeons in Scotland. It is not minimal access and is very rarely undertaken now.

No matter which operation is done the man will have a general anaesthetic while the operation is carried out. During the crisis with [COVID-19](#), a potential challenge for the urology team might be a reduced availability of general anaesthesia, and access to operating theatres.

With [RARP](#) he will usually need to stay in hospital overnight, but this can vary with his recovery and travel arrangements. He will have a [catheter](#) in place for a couple of weeks (depending on his individual circumstances).

With [LRP](#) he will usually need to stay in hospital 1-3days, but this can vary with his recovery and travel arrangements. He will have a [catheter](#) in place for a couple of weeks (depending on his individual circumstances).

In Scotland there are 3 centres that carry out RARP – Aberdeen, Edinburgh and Glasgow with one health board undertaking LRP.

Men from the majority of areas in Scotland will attend one of the 3 RARP centres for their operation. For some men this will require travelling quite large distances

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Registered Office Princes Exchange, 1 Earl Grey Street, Edinburgh EH3 9EE

potentially posing some difficulties as he won't be able to drive home and would need a family member to stay overnight or until he is discharged. Ambulance services may not be available as they respond to people with [COVID-19](#) complications.

If you have a [RARP](#) or [LRP](#) planned in the next few weeks or months someone from the urology team will most likely get in touch to discuss the way forward and, depending on individual circumstances, [discuss](#) postponing the operation if he/she thinks this might be best in the current situation.

This will depend on whether there are theatres, general anaesthesia and recovery beds available and on the man's individual circumstances.

Guidance from the British Association of Urological Surgeons suggests that men with [low or intermediate risk prostate cancer](#) (see page 32 of booklet 'Early prostate cancer explained') who are on the waiting list for prostatectomy can continue to wait for a [radical prostatectomy](#) as there is likely to be a low risk of this type of cancer progressing/spreading.

If you are in the [low or intermediate risk prostate cancer](#) (page 32) and your [RARP or LRP](#) is being postponed and perhaps you are feeling a bit anxious about the delay, the urologist **may** talk over the option of having [hormone therapy](#) (bicalutamide) in the meantime.

If it is not possible to offer surgery at this time to those men who have [high risk prostate cancer](#) (page 32), then [hormone therapy](#) will most likely be offered to reduce the risk of the cancer growing.

Your urologist or CNS will get in touch if the [radical prostatectomy](#) has to be unavoidably cancelled or postponed.

If [RARP or LRP](#) is going ahead, you must let the urology team know if you have had any symptoms which are suggestive of possible [COVID-19](#) infection. Some men may be concerned about [COVID-19](#) in the operating theatre. It is **always** the case that theatre staff and surgeons follow rigorous and meticulous procedures to maintain very high standards of hygiene in theatres.

If you have had a [RARP](#) then most men are well enough to be discharged the day after their operation or with [LRP](#) between 1-3 days after. However, this will depend on the rate of recovery of the individual and travel arrangements for those living long distances away. In all cases the urologist will see you after your operation and discuss with you when they are happy for you to go home.

After surgery and when you get home, you may be more at risk of developing an infection so you should **strictly follow** the measures already set out by the Scottish Government and NHS Scotland.

If you have had a [RARP or LRP](#) in the last few weeks, you will have gone home with a [catheter](#) in place. As your [catheter](#) can provide a direct path for bacteria (germs) to get into your bladder, you may develop a urinary tract infection (UTI). This is different from the [COVID-19](#) infection as [COVID-19](#) is a virus. However, because a UTI is still an infection it will have **some** similar symptoms to [COVID-19](#), but these shouldn't be confused with [COVID-19](#).

UTI symptoms	COVID-19 symptoms
Urine in your catheter bag becomes very blood stained or you notice blood clots	A new, continuous cough
High temperature, above 37.8° C	High temperature or fever above 37.8° C
Feverish – shivering, shaking, sore muscles	Shortness of breath or difficulty in breathing
Chills	Possibly lack of taste or smell
Feeling sick	Sore muscles
Headache	
Low back pain	
Feeling unwell and very tired	

If you notice symptoms of a UTI it is important to get in touch with your CNS, GP or whoever is looking after your catheter for more help and information as a UTI needs to be treated.

Around 2 weeks you will usually have a TWOC or '[trial without catheter](#)'. Your CNS or urologist will most likely get in touch to let you know arrangements for this in the current circumstances.

In normal circumstances, you would usually have a follow-up appointment in about 6-8 weeks' time to see how you are, check your wound and check your PSA level. Your [PSA](#) blood test would be done a few days before your hospital appointment at the [GP Practice](#).

Depending on the urology department that you attend you **may** go to the out-patient clinic to see the urologist/CNS. At the moment, it is most likely that consultations/appointments will be done by telephone or a video call whenever possible. This may be especially important if you live quite a distance away from the hospital to save on hours of travelling.

When you are home and someone in your household develops [COVID-19](#) symptoms it is vitally important that you **strictly follow** the measures already set out by the Scottish Government and NHS Scotland and mentioned in this guidance sheet

Who should I contact if I become unwell or develop side effects while on treatment for cancer?

If you have chest pain, significant bleeding or you need immediate medical attention call 999.

If you have a temperature or shivering or 'flu-like symptoms while you are on treatment for cancer, or for any side-effects of drug treatment, call your local cancer treatment helpline, or the national Cancer Treatment Helpline on 0800 917 7711. They will ask a series of questions and will give advice or arrange for you to have a medical review at your nearest hospital.

For more information and support

Organisation	Website/email
Prostate Scotland	www.prostatescotland.org.uk
For information on support groups please see	www.prostatescotland.org.uk/help-and-support-for-you/support-groups
NHS Inform	www.nhsinform.scot/
24-hour national cancer treatment helpline	0800 917 7711
Scottish government	www.gov.scot/coronavirus-covid-19/ https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2020/03/coronavirus-covid-19-tailored-advice-for-those-who-live-with-specific-medical-conditions/documents/cancer/cancer/govscot%3Adocument/Cancer%2BPatient%2BInfo%2Bguidance%2B-%2B090420.pdf
NHS 24	www.nhs24.com or telephone number is 111
British Association of Urological surgeons (BAUS)	www.baus.org.uk/patients/covid19_patient_information.aspx
Cancer Support Scotland	www.cancersupportscotland.org/
Macmillan cancer support Support nurses	www.macmillan.org.uk
Cancer research UK Cancer information nurses	www.cancerresearchuk.org

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The Beatson Cancer Treatment Helpline	For Beatson patients only 0141 301 7990
Maggie's Centres	www.maggies.org enquiries@maggies.org
Prostate Cancer UK	www.prostatecanceruk.org www.prostatecancer.org/coronavirus https://prostatecanceruk.org/get-support/our-specialist-nurses
For mental health help and information	
Mind	www.mind.org.uk/information-support/coronavirus-and-your-wellbeing/
Mental Health UK	https://mentalhealth-uk.org/help-and-information/covid-19-and-your-mental-health/
Breathing Space	Phone 0800 83 85 87 (6pm to 2am, weekdays and 24 hours at the weekend)
SAMH	https://www.samh.org.uk/ SAMH (Scotland's mental health)
Samaritans Scotland	https://www.samaritans.org/scotland/samaritans-in-scotland/
For general information and help with money worries CAB Citizens Advice Bureau	www.citizensadvice.org.uk/scotland/

New national service

A new national helpline has been set up (as from 15.4.20) to provide vital help to those people who don't have a network of support (such friends, family, neighbours) but who are at high risk of contracting [COVID-19](#).

The helpline number is 0800 111 4000. The helpline is currently available from 9.00am to 5pm but there are plans to increase the number of hours the helpline will be available each day.

The service will offer help to those who do not have family/friends/other support, those who cannot get online, those who are over 70, those who are disabled, those who require the support of mental health services, or receive a 'flu jab for health reasons. This service is in addition to the support already available for people who have received letters advising them to [shield](#) themselves.

People who call this helpline (0800 111 4000) will be put through to their local authority who will help them get the service they need, such as:

- essential food and medication
- links to local social work services for vulnerable children or adults
- emotional support
- contact with local volunteer groups.

About this information

The information contained in this leaflet has been developed by Prostate Scotland and reviewed by members of our advisory group, [PAGES](#).

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