

Patient information from BMJ

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Enlarged prostate: what treatments are there?

The prostate gland is part of the male reproductive system. As men get older their prostate can get bigger. This is called benign prostatic hyperplasia, or BPH for short. It 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.

You can use our information to talk to your doctor and decide which treatments are right for you.

What are the treatment options for benign prostatic hyperplasia (BPH)?

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

If your symptoms don't bother you too much, your doctor may suggest that you try 'watchful waiting'. This means seeing your doctor regularly to monitor your symptoms, without starting treatment.

You can decide to start 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:** these medicines work by relaxing the muscles in your prostate and bladder. This makes it easier for you to urinate. Your symptoms should start to get better after about two to three weeks.

But alpha-blockers can cause side effects, including tiredness, headaches, and feeling light-headed when you stand up. This light-headedness can cause some people to fall and injure themselves.

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Alpha-blockers can also cause dry climax during sex. This means less fluid (or no fluid) comes out of your penis when you have an orgasm. Although this may be temporary.

- **5-alpha reductase inhibitors:** these are medicines that help shrink larger prostates. But they take a few months to work. They may help reduce the size of your prostate by about one third. This should make it easier to pass urine.

If your prostate is large, 5-alpha reductase inhibitors can also reduce your chances of a serious condition called acute urinary retention. This is where you are suddenly unable to pass any urine at all. It needs to be treated urgently, usually with surgery.

But these drugs probably won't help if your prostate is smaller.

Side effects of these drugs can include problems getting an erection, premature ejaculation, and dry climax.

There is a possible risk of birth defects in unborn babies exposed to these medicines. Women who are pregnant shouldn't handle the tablets. Sexually active men should use condoms if there is a chance their partner could become pregnant.

- **Phosphodiesterase-5 (PDE-5) inhibitors:** these medicines are sometimes used to treat erection problems. One example of this type of medicine is sildenafil (viagra).

But they can also help with BPH symptoms. Doctors might suggest these medicines for people who have BPH symptoms and erection problems. Or people whose symptoms haven't improved with other medicines.

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. Call emergency services and get immediate medical help if you have any of these symptoms.

- **Anticholinergics:** these medicines can help relax the bladder muscle. They are useful if one of your main symptoms is feeling like you need to urinate more frequently.

Side effects of these drugs can include dizziness and a dry mouth.

Lifestyle measures

Your doctor might suggest some changes to your lifestyle to help relieve your symptoms.

- Avoid drinking large amounts of liquid at any one time.
- Avoid drinks altogether before going to bed.
- Get plenty of exercise.
- Reduce the amount of alcohol you drink. Alcohol can stimulate your bladder so you need to urinate more often.
- Cut back on coffee, tea, cola, or any other drinks that contain caffeine. Caffeine can also stimulate your bladder and make symptoms worse.

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- Try to avoid becoming constipated. This can put pressure on your bladder and make urinary symptoms worse. To help keep your bowels moving make sure you eat plenty of fibre (found in fruit and vegetables).
- Ask your doctor about techniques to help control bladder symptoms (such as bladder training, or pelvic floor exercises).
- Talk to your doctor about 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 BPH.

But 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.

You should always talk to your doctor before trying herbal treatments. Herbal products are not regulated in the same way as medicines. They might also interact with other medicines you are taking.

Surgery

Surgery might be an option for you if your symptoms are severe or other treatments have not helped. The most common operation men have for BPH is called **transurethral resection of the prostate, or TURP**. This involves cutting away part of the prostate using a special device that is passed up your urethra. It removes the blockage caused by your enlarged prostate so that you can urinate more quickly and easily.

Some men get TURP syndrome for a few days after this operation. This can make you feel confused or queasy, and you might vomit. TURP syndrome is rare, but if it happens you should tell the doctors or nurses looking after you immediately.

The operation can also cause some other side effects, including:

- Urinary incontinence.
- Blood in your urine. This is normal immediately after surgery, but should pass after a few days.
- Dry climax during orgasm. This affects more than 70 out of 100 men.^[1]
- Needing a repeat operation. 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. This 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. People might choose them because they are less invasive. But they may not relieve symptoms in the longer term as well as TURP.

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It's also worth remembering that these treatments are not available everywhere. Your choice of treatments is likely to vary between hospitals. The type of surgery most suitable for you is also likely to depend on your general health and the size of your enlarged prostate. Your doctor will talk to you about the best options for you.

Several treatments use lasers to remove some of the prostate tissue that is causing problems. They include **transurethral holmium laser enucleation of the prostate (HoLEP)**, **photoselective vaporisation (PVP)**, and **thulium laser enucleation (ThuLEP)**. These can all usually be done under local anaesthetic without an overnight stay in hospital.

Transurethral vaporisation of the prostate (TUVF) is a procedure that involves passing a device through the urethra. It uses an electric current to heat the enlarged tissue and burn it away. This current also seals the blood vessels and stops bleeding.

Prostatic urethral lift (PUL) implants involve a surgeon inserting a T-shaped implant to hold the enlarged prostate away from the urethra. This helps prevent the prostate from blocking your urethra.

A simple or open prostatectomy is where part of the prostate gland is removed through a small cut in your body. This procedure might be chosen if your prostate is over a certain size and not suitable for TURP or TUVF.

How do I decide which treatment is right for me?

You may want to ask yourself some questions, such as:

- How bad are my symptoms? If they are affecting your life then you may want to consider treatment. But mild symptoms of BPH often don't get any worse for many years. You may 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.
- How do I feel about the possible side effects?
- Do I want a permanent solution? If you're not happy taking tablets for a long time you may be better off opting for surgery. However, some men end up needing to have surgery again as their prostate continues to grow. And surgery can also have side effects.

For more questions you might want to talk through with your doctor, see our patient information: *Enlarged prostate: questions to ask your doctor*.

References

1. Liao J, Zhang X, Chen M, et al. Transurethral resection of the prostate with preservation of the bladder neck decreases postoperative retrograde ejaculation. *Wideochir Inne Tech Maloinwazyjne*. 2019 Jan;14(1):96-101.

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