PVP (Photo-vaporization of the Prostate)

There are many causes for difficulty urinating, among them is an enlarged prostate (BPH – benign prostatic hyperplasia). BPH prevents urine from exiting the bladder under low pressure because the prostate is enlarged and squeezing the urethra which passes through the prostate. When voiding symptoms (i.e. frequency, urgency, nocturia) become sufficiently problematic consideration can be given to treating the prostate to lower the resistance to urine flow. Although there are many ways to accomplish this, the one I favor is photo-vaporization of the prostate (PVP) accomplished by laser ablation. This procedure is considered minimally invasive and is performed by placing a cystoscope in the urethra and vaporizing the prostatic tissue from the inside. This enlarges the channel through which urine can flow and improves the quality of the urinary stream. Ultimately, it is expected that patients will void less urgently and less frequently as the bladder is able to empty under lower pressures.

The procedure is done as a day surgery in most cases. The surgery generally lasts about one hour. A major advantage of PVP ablation of the prostate is that there is minimal blood loss because the laser seals blood vessels as the tissue is vaporized. Therefore, there is also less risk of absorbing fluid into the blood stream during the procedure. Patients will wear a catheter in the bladder over night at home and then return to the office the following day for catheter removal.

After removal of the catheter it is expected that it will require 3 to 6 weeks for the inside of the prostate to fully heal. During that time patients may experience some increased frequency of urination and passing of a small amount of blood and material through the urethra. We recommend no heavy lifting or straining for the first 3 weeks following the procedure. It is likely some bleeding will occur when the scab on the inside of the prostate is sloughed at 10-21 days. We recommend avoiding anticoagulants, e.g. aspirin, ibuprofen, prescription blood thinners such Coumadin or Plavix, fish oil and vitamin E during the first 21 days following surgery. If you are on prescription blood thinners please check with the prescribing doctor for further instructions on when to stop and when to continue taking these medications. In general there is no prohibition to travel with the exception that no heavy lifting or straining should be done during that first three weeks.

Prior to PVP Procedure

Purchase items necessary for recovery prior to your procedure. See suggested Shopping List below.

Aspirin/Blood Thinners:

Let me know if you are taking any blood thinners such as aspirin, aspirin-containing medications, or prescription blood thinners such as Coumadin® or Plavix®. If you are on Coumadin and Plavix you will need to speak with the doctor who prescribed those medications about when to stop these medications prior to surgery and when you may resume these medications after surgery. Stop taking aspirin or aspirin-containing medications 7 to 10 days prior to the procedure. Some cold medicines contain aspirin so look at the label prior to taking.

Medications:

- Take your regularly prescribed medications the day of the procedure with a sip of water. (except for blood thinners)
- Obtain prescriptions for post-surgical medications prior to the procedure and have these filled prior to the procedure so you have these on hand.

<u>Cold/Fever 48 hours Prior to Procedure</u>: Call my office if you develop a cold, infection, fever, or develop other medical problems within 48-hours of prior to your scheduled procedure.

Night Before Surgery:

- Sometimes the anesthesiologist will call you the night before so make sure that *Call Blocking* is not activated on your phone. If he/she doesn't call, they will talk to you prior to the procedure in the holding area.
- **Do not eat or drink after 12:00 midnight the night before**. If your procedure is scheduled for the afternoon the anesthesiologist may allow you to have a clear liquid breakfast but you should clear it with the anesthesiologist, however, if you do eat and they want to move your case up earlier they won't be able to.
- Arrange for transportation home; you may not drive or operate equipment for 48 hours after the procedure.

Day of Surgery:

- Wear comfortable, loose-fitting clothing
- Bring a list of all the prescription and nonprescription medications that you take regularly with you on the day of the procedure. The nurse will need to record these in your chart.
- Arrive at the surgical facility two hours prior to your scheduled surgery. You will need to stay in the recovery area for a few hours after the surgery prior to being discharged home.

Post-PVP Procedure

Reasons to Call Dr Fulgham's Office:

Call the office if you continue to experience any of the following within 2-days after surgery: fever over 101°F (38°C); constipation; severe pain; inability to urinate. Some blood in the urine is normal.

Activity: Generally you need to restrict activity for 3 weeks following surgery, which includes:

- No lifting items over 10 pounds;
- No vigorous physical activity;
- When your urine is clear to yellow without any visible blood for <u>several days</u>, you can cautiously begin to resume normal activities.
- No driving any kind of vehicle while on prescribed narcotic pain medications.
- A donut-seat cushion for the first two weeks after surgery may make sitting more comfortable.
- No riding or driving a tractor or riding mower. After the 2-weeks of inactivity and all your scabs from the operation have passed, you may cautiously use a tractor or riding mower with a donut seat pad.
- Avoid long periods of (> 1 hour) of sitting in a fixed position with legs flexed, such as long flights or drives for the first 2 weeks. This will reduce the risk of blood clots in the legs.

Driving: You may resume full driving after meeting the following conditions:

- You have not taken any narcotic pain medications during the prior 48 hours;
- You can quickly move the proper foot to the brake pedal without any pain.

Pain:

During the first day or two after the procedure you will experience some mild pain and discomfort. If you take any of the prescribed pain medication you may get constipated and therefore it is recommended that you start an immediate diet high in insoluble fiber foods and juices.¹ You may use stool softeners if needed.

Urination:

After PVP, you may have a persistent feeling of needing to urinate before the bladder is actually full. This is normal and will resolve itself over time.

Sex:

Wait at least 2-weeks after surgery before engaging in sexual activity. Your initial ejaculation may be painful and may contain some blood. This is normal and will resolve itself over time. Remember that there may not be any semen produced after this procedure.

Lab Tests: A urinalysis or a PSA blood test within 2 months of the procedure will be abnormal.

<u>Diet:</u> Proper diet and fluid intake are important to recovery therefore:

- Drink plenty of water, but limit fluids after 6 pm.
- You may drink 4oz. of prune or pomegranate juice twice a day to reduce constipation.
- During the first 2-weeks of recovery:
 - Limit the intake of carbonated or caffeinated beverages.
 - Eat foods high in insoluble fiber. You may slowly resume your regular diet after this. Keep in mind that you shoud avoid constipation during recovery. If necessary, you may use a stool softener until your bowels start moving regularly again.

Medications:

Take all prescribed antibiotics in accordance with the instructions on the bottle. Only take pain medications as needed. Remember, pain medications contribute to constipation.

What to Expect after PVP Surgery

Bowel Function: Expect irregular bowel habits until you are fully recovered; this includes potential constipation issue, which you do not want. You should increase insoluble fiber in your diet. You may need a stool softener or laxative during the first two weeks of your recovery.

Urinary Function: Expect to have one or more of the following urinary issues:

- You may experience urinary urgency and frequency for the first month following surgery. This is normal. You may talk to the doctor to discuss medications that may relieve this.
- Occasionally you may have a small amount of blood or clots in your urine. This is normal, and will diminish by increasing your fluid intake.
- You may experience some mild burning and discomfort during urination. This is normal and should subside in one to two weeks after surgery.
- Expect to see bloody scabs in your urine at about 10-14 days after surgery. This may continue for a couple of days.

Urinary Catheter: Expect to have a catheter (normally up to 24 hours after surgery) to drain your bladder after the procedure.

- Do not attempt to remove the catheter yourself. The doctor will remove it.
- Do not disconnect the catheter from the drainage bag unless directed by the doctor.

• Wash around the catheter with soap and water and rinse well.

<u>Pain Medications</u>: Expect to have constipation if you take narcotic pain medications.. Therefore you should only take these medications when really necessary.

Pre-PVP Shopping List

This is just a suggested shopping list. You may or may not need all of these items but having them on hand when you need them may prevent a trip to the store.

Medications:

- Have all prescriptions filled prior to the procedure
- Bottle of Magnesium Citrate, Senekot or other laxative that you are used to taking
- Acetaminophen (Tylenol) for pain, take as directed on the bottle
- Bladder pain: Azo Standard (over-the-counter) or Pyridium (prescribed by the doctor).

Medical Supplies:

- 3M Surgical Tape (Transpire or Durapore) to affix urinary catheter if it comes loose
- Disposable underwear (Adult diapers)
- Donut Seat Cushion
- Knee Pillow

Clothing:

- Loose fitting cotton boxer briefs (3 6 pairs)
- Loose fitting shorts
- Loose fitting sweat pants

Groceries:

Foods to assist with bowel function and the prevention of constipation¹. Purchase whatever foods you usually eat to improve bowel function. A few suggestions are:

- Kellog's All-Bran Buds (very high in insoluble fiber)
- Dried blueberries, strawberries or raspberries (add to cereal)
- Prune or Pomegranate Juice (minimum of 48 oz.)

¹Fiber Content of Foods: <u>https://www.prebiotin.com/resources/fiber-content-of-foods/#fiber_content1</u>