

The Role of Trans-Urethral Resection of the Prostate (TURP) in Modern Urology and Complications

Selya Chung*

Department of Urology, Lingnan University, Tuen Mun, Hong Kong

DESCRIPTION

Trans-Urethral Resection of the Prostate (TURP) is a common surgical procedure used to treat Benign Prostatic Hyperplasia (BPH), a condition characterized by the enlargement of the prostate gland. TURP is considered the gold standard treatment for BPH when conservative measures and medications fail to provide adequate symptom relief. This article explores the procedure, indications, outcomes, and potential complications associated with transurethral resection of the prostate.

Procedure

Trans-Urethral Resection of the Prostate (TURP) is typically performed under general or spinal anesthesia and involves the following steps:

Insertion of the cystoscope: A cystoscope, a thin tube with a camera and light source, is inserted through the urethra into the bladder to visualize the prostate gland.

Resection of prostate tissue: Using specialized instruments passed through the cystoscope, the surgeon removes excess prostate tissue that is causing urethral obstruction. This is done using a cutting loop or electrocautery device.

Hemostasis: After the resection is complete, the surgeon ensures hemostasis (control of bleeding) by cauterizing any bleeding vessels within the prostate tissue.

Bladder irrigation: To remove any blood or tissue debris from the bladder, sterile irrigation fluid is circulated through the cystoscope and then drained.

Placement of urinary catheter: A urinary catheter is inserted into the bladder to allow urine drainage and facilitate healing of the urethra.

Indications for TURP

Trans-Urethral Resection of the Prostate (TURP) is indicated for men with symptomatic Benign Prostatic Hyperplasia (BPH) who

have failed to respond to conservative measures, such as lifestyle modifications or medications. Common indications for TURP include:

Severe urinary symptoms: Men with bothersome urinary symptoms, such as urinary frequency, urgency, weak urinary stream, incomplete bladder emptying, or urinary retention, may benefit from TURP to alleviate symptoms and improve urinary flow.

Recurrent Urinary Tract Infections (UTIs): BPH-related bladder outlet obstruction can increase the risk of urinary tract infections (UTIs). TURP may be recommended for men with recurrent UTIs that are not responsive to conservative management.

Bladder stones: BPH-related bladder outlet obstruction can lead to the formation of bladder stones. TURP may be indicated for men with symptomatic bladder stones or recurrent stone formation.

Urinary retention: In cases of acute or chronic urinary retention due to BPH, TURP may be performed to relieve bladder obstruction and restore normal urinary function.

Outcomes and complications

Trans-Urethral Resection of the Prostate (TURP) is associated with high rates of symptom improvement and patient satisfaction. The procedure has been shown to effectively relieve urinary symptoms, improve urinary flow, and reduce the risk of complications associated with Benign Prostatic Hyperplasia (BPH). However, TURP is not without risks, and potential complications may include:

Bleeding: TURP can cause bleeding within the prostate gland or the urinary tract, leading to blood in the urine (hematuria). In rare cases, excessive bleeding may require blood transfusion or additional interventions to achieve hemostasis.

Urinary Tract Infection (UTI): TURP can increase the risk of urinary tract infection (UTI) due to instrumentation of the

Correspondence to: Selya Chung, Department of Urology, Lingnan University, Tuen Mun, Hong Kong, E-mail: selyac@uhrc.com

Received: 29-Feb-2024, Manuscript No. MSU-24-30341; **Editor assigned:** 04-Mar-2024, PreQC No. MSU-24-30341 (PQ); **Reviewed:** 18-Mar-2024, QC No. MSU-24-30341; **Revised:** 25-Mar-2024, Manuscript No. MSU-24-30341 (R); **Published:** 01-Apr-2024, DOI: 10.35248/2168-9857.23.13.347

Citation: Chung S (2024) The Role of Trans-Urethral Resection of the Prostate (TURP) in Modern Urology and Complications. Med Surg Urol.13: 347.

Copyright: © 2024 Chung S. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

urinary tract and the presence of urinary catheter. Prophylactic antibiotics are typically prescribed to reduce the risk of UTIs following TURP.

Urinary incontinence: Temporary urinary incontinence, or leakage of urine, may occur following TURP due to irritation of the bladder or urethra. Most cases of urinary incontinence resolve spontaneously within a few weeks to months after the procedure.

Retrograde ejaculation: TURP can disrupt the internal urinary sphincter, leading to retrograde ejaculation, where semen flows backward into the bladder instead of being ejaculated through the urethra. While retrograde ejaculation is not harmful, it may affect fertility or sexual satisfaction in some men.

CONCLUSION

Trans-Urethral Resection of the Prostate (TURP) is a safe and effective surgical procedure for the treatment of Benign Prostatic Hyperplasia (BPH) in men with bothersome urinary symptoms. By relieving bladder outlet obstruction and reducing prostate size, TURP can significantly improve urinary function and quality of life. While TURP is associated with potential complications, the benefits of the procedure often outweigh the risks for appropriately selected patients. Close monitoring and follow-up care are essential to optimize outcomes and minimize the risk of complications following TURP.