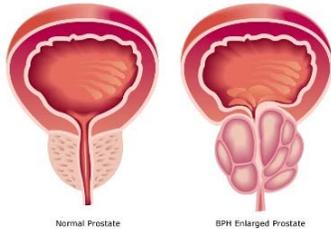


PATIENT'S GUIDE TO BENIGN PROSTATIC HYPERPLASIA (BPH)

WHAT IS BPH?

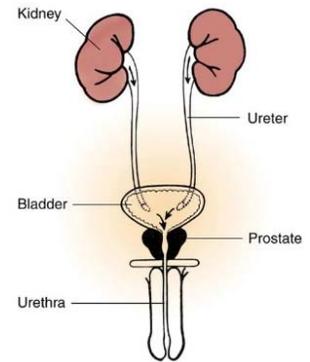
As a man matures, the prostate goes through two main periods of growth. The first occurs early in puberty, when the prostate doubles in size. At around age 25, the gland begins to grow again. This second growth phase often results, years later, in BPH.

Though the prostate continues to grow during most of a man's life, the enlargement doesn't usually cause problems until late in life. BPH rarely causes symptoms before age 40, but more than half of men in their sixties and as many as 90 percent in their seventies and eighties have some symptoms of BPH.



As the prostate enlarges, the layer of tissue surrounding it stops it from expanding, causing the gland to press against the urethra like a clamp on a garden hose. The bladder wall becomes thicker and irritable. The bladder begins to contract even when it contains small amounts of urine,

causing more frequent urination. Eventually, the bladder weakens and loses the ability to empty itself, so some of the urine remains in the bladder. The narrowing of the urethra and partial emptying of the bladder cause many of the problems associated with BPH.



SYMPTOMS

Many symptoms of BPH stem from obstruction of the urethra and gradual loss of bladder function, which results in incomplete emptying of the bladder. The symptoms of BPH vary, but the most common ones involve changes or problems with urination, such as

- A hesitant, interrupted, weak stream
- Urgency and leaking or dribbling
- More frequent urination, especially at night

It is important to tell your doctor about urinary problems such as those described above. In eight out of 10 cases, these symptoms suggest BPH, but they also can signal other, more serious conditions that require prompt treatment. These conditions, including prostate cancer, can be ruled out only by a doctor's examination.

Severe BPH can cause serious problems over time. Urine retention and strain on the bladder can lead to urinary tract infections, bladder or kidney damage, bladder stones, and incontinence—the inability to control urination. If the bladder is permanently damaged, treatment for BPH may be ineffective. When BPH is found in its earlier stages, there is a lower risk of developing such complications.

DIAGNOSIS

The American Urological Association (AUA) designed a series of questions to find out how often symptoms occur. The AUA Symptom Score allows men to rate their symptoms so their doctors can understand how bad they are.

When a health care provider checks a man for an enlarged prostate, he or she takes an in-depth health history. He or she may also ask questions from the AUA Symptom Score. The provider does a physical exam, along with a digital rectal exam (DRE). The health care provider will often do a urine test called a urinalysis for a man with an enlarged prostate. The provider may also run other tests, including:

- Prostate specific antigen (PSA) - a blood test to screen for prostate cancer
- Urinary cytology - a urine test to screen for bladder cancer
- A measurement of post-void residual volume (PVR), the amount of urine left in the bladder after urinating
- Uroflowmetry, or urine flow study, a measure of how fast urine flows when a man urinates
- Cystoscopy - a direct look in the urethra and/or bladder using a small flexible scope
- Urodynamic pressure-flow study - tests the pressures inside the bladder during urination
- Ultrasound of the kidney or the prostate – to view the enlargement

TREATMENT

The American Urological Association (AUA) makes the following treatment recommendations for benign prostatic hyperplasia (BPH) based on how bad your symptoms are:

- Symptoms that are mild or that do not bother you (AUA score of 0 to 7) may be best treated by watchful waiting. This means you may make small changes to your lifestyle to control your symptoms. You do not take medicines or have surgery. You have regular checkups to be sure your symptoms are not getting worse.
- The treatment of moderate to severe symptoms (AUA score of 8 or more) depends on how much you are bothered by them. If the symptoms are not greatly affecting your quality of life, you may choose watchful waiting or treatment with medicine. If the symptoms are bothersome or you want more aggressive treatment, you may be offered surgery or less invasive therapies, such as transurethral microwave therapy (TUMT) or transurethral needle ablation (TUNA).
- Complications of BPH, such as ongoing inability to urinate, infections, bladder stones, kidney damage, or ongoing blood in your urine, should be treated with surgery. You may also want surgery if your symptoms have not been helped with other treatments.
- If your symptoms of benign prostatic hyperplasia (BPH) remain mild and not bothersome, watchful waiting may be your best treatment. With this treatment, you may make small changes to your lifestyle to control your symptoms. You do not take medicines or have surgery. You have regular checkups to be sure your symptoms are not getting worse.

LIFESTYLE

Making some lifestyle changes can often help control the symptoms of an enlarged prostate and prevent your condition from worsening. Try these measures:

- Limit beverages in the evening. Don't drink anything for an hour or two before bedtime to help you avoid wake-up trips to the bathroom at night.
- Don't drink too much caffeine or alcohol. These can increase urine production, irritate your bladder and worsen your symptoms.
- If you take water pills (diuretics), talk to your doctor. Maybe a lower dose, taking them only in the morning, or a milder diuretic or change in the time you take your medication will help ease urinary symptoms. Don't stop taking diuretics without first talking to your doctor.
- Limit decongestants or antihistamines. These drugs tighten the band of muscles around your urethra that control urine flow, which makes it harder to urinate.
- Go when you feel the urge. Try to urinate when you first feel the urge. Waiting too long to urinate may overstretch the bladder muscle and cause damage.
- Schedule bathroom visits. Try to urinate at regular times to "retrain" the bladder. This can be done every four to six hours during the day and can be especially useful if you have severe frequency and urgency.
- Stay active. Inactivity causes you to retain urine. Even a small amount of exercise can help reduce urinary problems caused by an enlarged prostate.
- Urinate — and then urinate again a few moments later. This is known as double voiding.
- Keep warm. Colder temperatures can cause urine retention and increase your urgency to urinate.