

Comparative postoperative outcomes of Rezūm prostate ablation in patients with large versus small glands

Raevti Bole, Ajay Gopalakrishna, Ruby Kuang, Jamal Alamiri, David Y. Yang, Sevann Helo, Matthew J. Ziegelmann, Tobias S. Köhler

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Limitations of this report include:

- This study was retrospective, limiting the ability to control for confounding factors.
- No comparator arm with alternative therapies (e.g., HoLEP, TURP).
- Some follow-up data were missing.
- Short follow-up period (3 months) limits insight into long-term outcomes.

Conclusion: Rezūm therapy is a efficacious, minimally invasive treatment for BPH even in men with prostates >80cc. Significant improvements were seen in symptom scores, urinary flow, and bladder emptying. Outcomes in large glands were comparable to those in smaller glands. Among catheter-dependent patients with glands >80 cc, over 80% were catheter free after Rezūm. Our experience supports the consideration of Rezūm in patients with prostate glands >80 cc; further studies are warranted to confirm long-term outcomes.



Rezūm™ System Brief Summary

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This study aimed to evaluate the efficacy and safety of Rezūm in men with prostate volumes >80 cc, focusing on short-term functional outcomes and complication rates compared to men with smaller prostate glands.

This single-institution retrospective review included 182 patients treated with Rezūm from July 2017 to April 2019. Patients were stratified by prostate volume into <80 cc and ≥80 cc groups. Primary outcomes measured at 3 months post-procedure included changes in American Urological Association Symptom Score (AUASS), peak urinary flow rate (Qmax), and postvoid residual (PVR). Subgroup analysis was performed in catheter-dependent patients. Complications were also assessed. Statistical analyses used Wilcoxon signed-rank and chi-squared or Fisher's exact tests via RStudio.

Table 2. Pre- and postoperative clinical outcomes following Rezūm prostate ablation

Outcome variables	Gland <80 g, mean	p	Large gland, mean	p
AUASS (SD)				
Preoperative	22.1 (6.0)	0.0005	22.0 (5.3)	0.04
Postoperative	12.1 (5.4)		13.4 (6.7)	
Peak flow, mL/second (SD)				
Preoperative	9.2 (4.5)	0.001	7.7 (3.8)	0.002
Postoperative	12.9 (6.8)		12.7 (8.7)	
PVR, mL (SD)				
Preoperative	301 (252)	<0.001	305 (209)	0.05
Postoperative	157 (135)		149 (132)	

Table 3. Post Rezūm prostate ablation complication rates

Complications	Gland <80 g (N = 135), n (%)	Large gland (N = 47), n (%)	p
Catheter irrigation	7 (5.2)	7 (14.9)	0.06
Cystoscopic clot evacuation	1 (0.7)	2 (4.3)	0.17
Transfusion	0	2 (4.3)	0.07
Urinary tract infection	21 (15.6)	4 (8.5)	0.33
Required inpatient admission for IV antibiotics	4 (3.0)	1 (2.1)	0.72

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