

Real-world early outcomes and retreatment rates following water vapour ablative therapy for symptomatic benign prostatic hyperplasia

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Limitations of this report include:

- The mean follow-up duration of 16.7 months limits the ability to comment on long-term durability, particularly beyond 3 years.
- 6.9% of patients did not attend follow-up visits, and some may have had retreatments at other centers.
- A limited number of patients completed the International Index of Erectile Function (IIEF-5) questionnaire, affecting the assessment of sexual function outcomes.

Conclusion:

The study confirmed that Rezūm is effective for improving urinary symptoms and urinary flow. Most patients experienced symptom relief and preserved sexual function post-treatment. The overall retreatment rate (4.6%) was consistent with the rates from other studies of Rezūm, and the majority of retreatments occurred within the first two years.

Data were prospectively collected for consecutive patients undergoing Rezūm therapy between March 2017 and January 2020 at two hospital sites in the UK. A total of 461 patients were included in the analysis, with follow-ups at 6 weeks, 3 months, 6 months, and 12 months after the procedure.

- From baseline to 12 months, significant improvements in mean Qmax (9.7 mL/s to 18.0 mL/s), mean PVR (172.1 mL to 96.7 mL), mean IPSS (20.9 to 4.8) and QoL scores (4.5 to 1.2) were observed ($p < 0.0001$).
- 21 patients (4.6%) required retreatment during the follow-up period, with 11 (2.4%) needing retreatment within the first year and the median retreatment being 11.5 months.
- Larger prostate sizes (above 80 mL) did not correlate with higher retreatment rates.

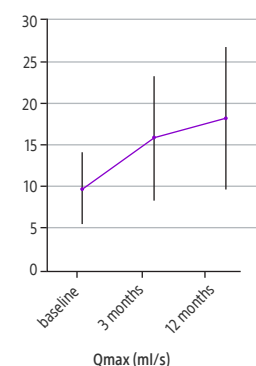
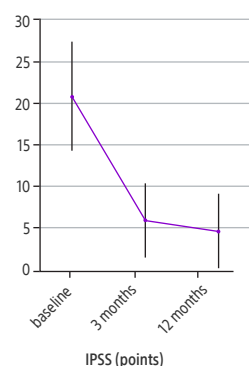
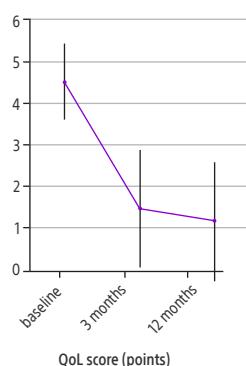


Table 2 – Retreatments performed according to time since the initial Rezūm treatment

Retreatment	Patients (n)		
	Year 1	Year 2	Year 3
Bladder neck incision	4	4	0
Transurethral resection/incision of the prostate	4	2	0
Greenlight photoselective vaporisation of the prostate	2	0	2
Rezūm	1	2	0

Full Article Reference:

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