



## Benign Prostatic Hyperplasia (BPH) Treatment Options

	Watchful Waiting Daily Medication		Minimally Invasive Therapy		Surgical Procedure				
	Behavioral	Alpha-Blockers	5-Alpha Reductase	Water Vapour Therapy	Prostatic Urethral Lift (PUL)	্বাচ ট Laser Therapy		Ŭ Transurethral	Prostatectomy
	Modifications	THE STOCKETS	Inhibitors			Vaporisation	Endoscopic Anatomical Enucleation	Resection of the Prostate (TURP)	
What is it?	May involve lifestyle modification such as adjusting diet, evening fluid intake, medication use and exercise patterns <sup>1</sup>	Helps to relax the muscles in the bladder and prostate, allowing urine to flow more freely <sup>*4</sup>	Designed to stop the growth or shrink the prostate by lowering production of the hormone DHT (a male sex hormone) <sup>5</sup>	This therapy uses the natural energy stored in water vapour to shrink excess prostate tissue	A procedure that utilises permanent implants to lift and hold the enlarged prostate tissue out of the way, so it no longer blocks the urethra	This procedure uses laser to vaporise and remove prostate tissue	The procedure involves the removal of the prostatic adenoma followed by division and removal of the prostatic tissues <sup>15</sup>	A procedure that uses a heated wire to cut tissue from the prostate	A procedure that involves surgical removal of the inner portion of the prostate via an incision in the lower abdominal area <sup>3</sup>
Proven Volume Reduction?	No	No	Yes <sup>5</sup>	Yes <sup>6</sup>	No	Yes <sup>10</sup>	Yes <sup>15, 17</sup>	Yes <sup>11</sup>	Yes <sup>13</sup>
Permanent Implant?	No	No	No	No	Yes	No	No	No	No
Surgical Retreatment Rate	N/A 19% were satisfied with lifestyle changes as a treatment <sup>2</sup>	N/A 71% stop taking their medication within a year <sup>2</sup>		4.4 %*6	13.6 %* <sup>8</sup>	4.8 %*10	HoLEP has a 95% reoperation-free probability at 10 years <sup>15</sup>	5.8 %*12	2.7 %*12
* This is not a complete list of all side effects associated with each treatment. You should speak with your doctor about the risks associated with each treatment option	Symptoms may worsen or remain unchanged <sup>3</sup> If your prostate continues to grow, you may have reduced options for minimally invasive intervention	Drop in blood pressure¹     Dizziness and/or fainting¹     Fatigue¹     Drug interactions with other medications³	Erectile dysfunction¹     Lowered sexual drive¹     Ejaculatory dysfunction¹     Breast enlargement¹	Painful or frequent urination**7 Blood in the urine**7 Blood in semen**7 Decrease in ejaculatory volume**7 Urinary tract infection (UTI)**7 Inability to urinate or completely empty the bladder**7 Urgent need to urinate**7	Painful or frequent urination**9 Blood in the urine**9 Pelvic pain**9 Urigent need to urinate**9 Inability to urinate or completely empty the bladder**9 Painful ejaculation**	Painful or frequent urination***11,18,19 Urinary tract infection (UTI)***1,18,19 Inability to urinate or completely empty the bladder***11,18,19 Bleeding***11,18,19 Urinary incontinence****11,18,19 Scarring and narrowing of the urethra***11,18,19 Narrowing of the bladder neck (area of the bladder that connects to the urethra)***11,18,19 Dry orgasm***11,18,19 Erectile dysfunction***11,18,19	Urinary incontinence <sup>16</sup> Dry orgasm <sup>17</sup> Frectile dysfunction <sup>16</sup> Restriction of blood flow <sup>15</sup> Hematuria <sup>15</sup>	Painful or frequent urination***11,19 Urinary tract infection (UTI)***11,19 Inability to urinate or completely empty the bladder***11,19 Bleeding****11,19 Urinary incontinence****11,19 Scarring and narrowing of the urethra****11,19 Narrowing of the bladder neck (area of the bladder that connects to the urethra)***11,19 Dry orgasm***11,19 Erectile dysfunction****11,19	Bleeding** <sup>13,19</sup> Blood transfusion** <sup>13,19</sup> Severe infection** <sup>13,19</sup> Scarring and narrowing of the urethra** <sup>13,19</sup> Narrowing of the bladder neck (area of the bladder that connects to the urethra)** <sup>13,19</sup> Urinary incontinence** <sup>13,19</sup> Dry orgasm** <sup>13,19</sup> Erectile dysfunction** <sup>13,19</sup>
o. scan the Qir code.		* When daily dosages are		* Based on 5-year data from	* Based on 5-year data from	* Based on 5-year data from rar	ndomized controlled study. Only	* Based on 5-year data from	* Based on 5-year data from



<sup>\*</sup> When daily dosages are taken as directed.

<sup>\*</sup> Based on 5-year data from randomized controlled study. Only includes surgical retreatment rate.

<sup>\*\*</sup> Dependent on individual clinical situation and healing response.

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- 1. C1. Cambio AJ, Evans CP. Outcomes and quality of life issues in the pharmacological management of benign prostatic hyperplasia (BPH). Ther Clin Risk Manag. 2007 Mar;3(1):181-96.
- 2. Data on File with Boston Scientific.
- 3. Carter HB. Prostate Disorders: The Johns Hopkins White Papers. Baltimore, MD: Johns Hopkins Medicine. 2010:1-24.
- 4. NIH. Prostate Enlargement: Benign Prostatic Hyperplasia. https://www.niddk.nih.gov/health-information/urologic-diseases/prostate-problems/prostate-enlargement-benign-prostatic-hyperplasia.
- 5. Wojcik M, Dennison D. Home study program: Photoselective vaporization of the prostate in ambulatory surgery. AORN Journal. 2006 Feb;83(2):347-50.
- 6. McVary KT, Roehrborn C. Five year results of the prospective, randomized controlled trial of water vapor thermal therapy for treatment of lower urinary tract symptoms due to benign prostatic hyperplasia. Late-Breaking Abstract. J Urol. 2020 Apr;203(4):e1021.
- 7. Rezūm System Instructions for Use.
- 8. Roehrborn CG, Barkin J, Gange SN, et al. Five-year results of the prospective randomized controlled prostatic urethral L.I.F.T. study. Can J Urol. 2017 Jun;24(3):8802-13.
- 9. UroLift System Instructions for Use.
- 10. Calves J, Thoulouzan M, Perrouin-Verbe MA, et al. Long-term patient-reported clinical outcomes and reoperation rate after photovaporization with the XPS-180W GreenLight laser. Eur Urol Focus. 2019 Jul;5(4):676-80.
- 11. Bachmann A, Tubaro A, Barber N, et al. 180-WXPS GreenLight laser vaporization versus transurethral resection of the prostate for the treatment of benign prostatic obstruction: 6-month safety and efficacy results of a European multicentre randomized trial—The GOLIATH Study. Eur Urol. 2014 May;65(5):931-42.
- 12. Madersbacher S, Lackner J, Brössner C, et al. Reoperation, myocardial infarction and mortality after transurethral and open prostatectomy: a nation-wide, long-term analysis of 23,123 cases. Eur Urol. 2005 Apr;47(4):499-504.
- 13. Serretta V, Morgia G, Fondacaro L, et al. Open prostatectomy for benign prostatic enlargement in southern Europe in the late 1990s: A contemporary series of 1800 interventions. Urology. 2002 Oct;60(4):623-7.
- 14. American Urological Association Education Research, Inc. American Urological Association Guideline: Management of Benign Prostatic Hyperplasia (BPH), Revised. 2010.
- 15. Elkoushy et al., Reoperation After Holmium Laser Enucleation of the Prostate for Management of Benign Prostatic Hyperplasia: Assessment of Risk Factors with Time to Event Analysis, JOURNAL OF ENDOUROLOGY, Volume 29, Number 7, July 2015.
- 16. Bell et al., Safety and efficacy of Holmium laser enucleation of the prostate (HoLEP) in patients with previous transperineal biopsy (TPB): outcomes from a dual-centre casecontrol study, Bell et al. BMC Urology (2019) 19:97, https://doi.org/10.1186/s12894-019-0523-z.
- 17. EAU guidelines, https://uroweb.org/wp-content/uploads/EAU-Guidelines-on-Non-Neurogenic-Male-LUTS-incl.-BPO-2020.pdf.
- 18. GreenLight XPS Instructions for Use.
- 19. Parsons JK, Dahm P, Köhler TS, et al. Surgical management of lower urinary tract symptoms attributed to benign prostatic hyperplasia: AUA Guideline Amendment 2020. J Urol. 2020 Oct; 204(4):799-804.

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