



Patient Diagnosis Resource for BENIGN PROSTATIC HYPERPLASIA (BPH)

Your Diagnosis

Your doctor has determined that you have benign prostatic hyperplasia, or BPH, a normal enlargement of the prostate gland that occurs in men as they get older. BPH is not cancer and does not increase the risk of developing prostate cancer. The chance of developing BPH increases with age. More than half of all men over the age of 60, and about 90% of those over age 70, have symptoms of the condition.

About the Condition

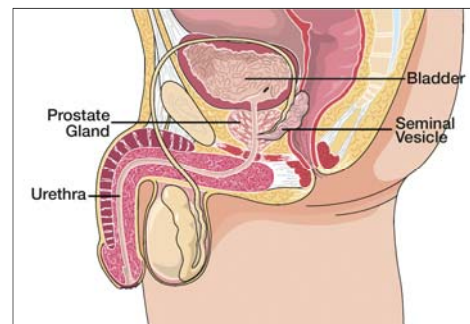
The prostate gland is typically the size of a walnut, located below the bladder and in front of the rectum in men. It surrounds a portion of the urethra, or tube that carries urine from the bladder out of the body. Its main purpose is to produce fluid for semen, which transports sperm.

Benign prostatic hyperplasia occurs when the prostate grows in size as a man gets older. The exact cause of this normal prostate enlargement is still the subject of research, but it seems to be related to the hormonal changes of aging.

The prostate is encased in a layer of tissue and does not expand outwardly as it enlarges. The gland instead pushes inward against the urethra, which can cause a partial, or sometimes complete, blockage.

In response to the blockage, the wall of the bladder thickens and becomes irritable. The bladder will then contract more forcefully, even when only slightly full, to push urine through the narrowed urethra. The result is a need to urinate frequently, especially at night. Other symptoms caused by BPH include:

- ◆ Suddenly and urgently needing to urinate
- ◆ Having to push or strain to begin urinating
- ◆ Experiencing a weak, slow or interrupted urinary stream
- ◆ Feeling that the bladder did not completely empty
- ◆ Getting a urinary tract infection



Not all men with BPH suffer the troublesome urinary symptoms that can arise from the condition.

Treatment Options

BPH only needs treatment if the symptoms are particularly bothersome or if the urinary tract is seriously affected. Deciding on a treatment plan can depend upon a variety of factors, such as the severity of the condition and your age, general health condition and personal preferences.

The following treatment possibilities are available:

Watchful Waiting – Some patients with mild symptoms decide not to pursue active therapy for their BPH, but rather adopt a “wait and watch” tactic. Men who choose this approach usually have an annual exam to check the status of their condition. If troublesome symptoms develop, a plan of treatment can be implemented.

Medication – BPH can be treated with medications that help relax prostate gland muscles (alpha blockers), drugs that help the prostate to shrink (5-alpha reductase inhibitors), or a combination of the two. These drugs improve urinary flow and symptoms, and are taken orally every day.

Surgery – Three main types of surgery are used to treat BPH: transurethral resection of the prostate (TURP), transurethral incision of the prostate (TUIP), and prostatectomy. TURP is the most common BPH surgery, and helps relieve symptoms in men who have trouble urinating. During the procedure, prostate tissue that blocks urine flow is removed. During the TUIP procedure, one or two small cuts are made in the prostate to reduce pressure on the urethra, making urinating easier. Prostatectomy is the removal of part or all of the prostate gland.

Other Treatments – Additional treatments for BPH include laser surgery and thermal therapy (with microwave or radiofrequency energy) to destroy prostate tissue, as well as prostatic stents, which are spring-like devices placed in the urethra to hold it open.

What You Can Do

To help reduce the symptoms of BPH, you can:

- ◆ Employ hydrotherapy up to 3 times a day by sitting in a tub of cold water for 15 to 30 minutes. You may also use cold packs applied between the scrotum and anus.
- ◆ Avoid sugar, caffeine, dairy products, alcohol (especially beer), and fried and refined foods.
- ◆ Drink plenty of water and eat healthy foods such as fruits and vegetables, whole grains, beans, soy, seeds and nuts, olive oil and cold-water fish (e.g., salmon, tuna, halibut, mackerel).
- ◆ Avoid over-the-counter antihistamines and decongestants, which can make it more difficult to urinate.
- ◆ Take dietary supplements or herbs such as zinc, flaxseed meal, beta-sitosterol, flower pollen, saw palmetto, or stinging nettles. Be sure to consult your doctor before taking any supplements or herbs.

Additional Resources

American Foundation for Urologic Disease, 800.828.7866, www.afud.org

The Prostatitis Foundation, 888. 891.4200, www.prostatitis.org

Urology Channel, www.urologychannel.com

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