



7

Frequently Asked Questions on BPE

The underlined terms are listed in the glossary.

Here is a list of the most frequently asked questions about BPE. You can read the different sections of EAU Patient Information on Benign Prostatic Enlargement for more information.

This section offers general information benign prostatic enlargement and diagnosis or treatment can vary in different countries.

What is BPE?

Benign prostatic enlargement is a common condition in older men. The prostate slowly grows and compresses the urethra at the outlet of the bladder. This is caused by hormonal changes. BPE may affect the way you normally urinate and may have a negative effect on your quality of life as it results in lower urinary tract symptoms (LUTS). It is the most frequently diagnosed condition in urology.

More information?

You can read more in the section [Benign Prostatic Enlargement](#).

What does the prostate do?

The prostate is a gland which produces the fluid which carries semen. It contains smooth muscles which help to push out the semen during ejaculation. The prostate is located directly below the bladder and around the urethra.

What are the possible symptoms in men with BPE?

BPE can make your flow of urine very slow, it may cause your urine flow to stop and start several times while emptying your bladder, or you may need to wait and push (strain) before you can start urinating.

BPE may cause you to urinate often during the day and may wake you up at night to empty your bladder (known as nocturia). It may also cause urgency and can sometimes lead to involuntary loss of urine (known as incontinence).

You may also feel that your bladder did not completely empty after urination. Your stream of urine may end with dribbling. Urine sometimes dribbles into your underwear when you leave the toilet after urinating.

What are LUTS?

The symptoms associated with BPE are sometimes called male LUTS (lower urinary tract symptoms). LUTS can be due to other conditions which affect the urinary system.

Are lower urinary tract symptoms (LUTS) an indication to look for early prostate cancer?

BPE is not cancer and does not cause cancer. However, both BPE and prostate cancer can develop as you grow older. If you have never been screened for prostate cancer, your urologist may screen for it when you come in for your prostate symptoms.

Which tests are done to diagnose BPE?

The doctor will take your medical history and do a physical examination, including a digital rectal examination (DRE) of the prostate. During DRE the doctor uses a finger to feel the size, shape, and consistency of the prostate. Your symptoms will be carefully evaluated, blood and urine tests are done, and the speed of your flow of urine is measured during uroflowmetry.

Why is PSA tested in case of symptoms caused by BPE?

The level of PSA (prostate-specific antigen) in your blood may be tested because BPE and prostate cancer can occur in the same age group. PSA can also be used to estimate your prostate volume and it can be used to estimate the risk of the BPE symptoms getting worse.

What is the purpose of urinalysis and urine culture?

Urinalysis is used to rule out that you have a urinary tract infection, which causes similar symptoms. If you do have an infection, urine culture is used to confirm this and to select the best antibiotic treatment for the infection.

What is the purpose of uroflowmetry?

Uroflowmetry measures the speed of the flow of urine. This test is done to see if the prostate obstructs the urine flow.

Why is post void residual (PVR) measured?

The amount of urine left in the bladder after urination is measured to see whether the bladder is able to empty completely. High PVR is a sign that the bladder is not functioning well or that there is a blockage to the urethra. This may increase the risk of urinary tract infections.

What is the purpose of an ultrasound of the bladder and prostate?

Ultrasonography of the bladder can be used to diagnose possible other causes of the symptoms. It can also see if you have other conditions that coexist with BPE which may make the symptoms worse or have an effect on selecting the best treatment option for you.

Prostate ultrasound is used to measure prostate volume. This may be important to confirm the diagnosis of prostate enlargement and to decide which treatment option is best for you.

When do you need treatment for the lower urinary tract symptoms associated with BPE?

You will get treated for the symptoms caused by BPE if they are bothersome and your quality of life has been affected by them.

What is Watchful Waiting?

If you have mild LUTS you will generally not need drugs or surgery. Instead, the urologist will closely observe your condition over the following months or years and will start different treatment when needed. The urologist will explain your condition to you, how it can develop, and how you can adjust your lifestyle to reduce your symptoms and cope with them.

More information? You can read more in the section [Lower Urinary Tract Symptoms \(LUTS\) and Diagnosis of BPE](#).

How can lifestyle changes help when you suffer from the lower urinary tract symptoms associated with BPE?

Some easy lifestyle changes can help to improve the symptoms caused by BPE. For instance, you can drink less in the evening which helps to reduce nocturia. Drink less alcohol, coffee or tea to avoid bladder irritation.

For some men it helps to empty the bladder completely if they urinate while sitting down. If you still feel your bladder is not completely empty, you can try again after 5-10 minutes.

Encourage yourself to “hold on” longer when you feel the urgency to urinate. This will train your bladder to keep more urine so that you will need to urinate less often.

What types of drugs are used to relieve the symptoms caused by BPE?

There are five categories of drugs:

- Herbal drugs: These drugs are made of plant extracts which may help to relieve the symptoms caused by BPE. Because of the large variety in the quality and effect of these drugs, they are not widely recommended.
- Alpha-blockers: This group of drugs relaxes the smooth muscle of the prostate which relieves the symptoms. This is the most commonly recommended group of drugs for men with BPE.
- 5-alpha reductase inhibitors (5ARIs): These drugs slowly reduce the prostate size and improve the symptoms. They are often used in combination with alpha-blockers.
- Muscarinic receptor antagonists (MRAs): These drugs reduce bladder contractions and can relieve bothersome storage symptoms. They can be used alone or in combination with alpha-blockers.
- Phosphodiesterase 5 inhibitors (PDE5Is): These drugs were developed for the treatment of [erectile dysfunction](#) but they also relieve symptoms caused by BPE (but they do not improve the flow of urine). Tadalafil is the only PDE5I which is licenced in Europe for the treatment of BPE. PDE5Is are usually not covered by insurance companies or the national health service.

What is the main purpose of surgery for BPE?

The main purpose of surgery is to relieve the symptoms associated with BPE and to improve the flow of urine.

What is the most common surgery to treat BPE?

The most recommended surgical treatment for the symptoms of BPE is transurethral resection of the prostate (TURP). The aim is to remove the part of the prostate which causes the symptoms (the [adenoma](#)). The procedure is done through the urethra without making an incision in your lower abdomen, which is known as [minimally invasive treatment](#). TURP offers optimal improvement of the symptoms caused by BPE. After TURP, you may have [retrograde ejaculation](#).

BPE can also be treated by other types of surgery:

- Transurethral incision of the prostate (TUIP): During TUIP, the doctor cuts into the prostate through the bladder neck to improve the flow of urine. This procedure is rarely used for the treatment of BPE because similar results can be achieved with drug treatment.
- Open prostatectomy: This procedure removes the adenoma in a way similar to TURP or laser enucleation, but is done by making an incision in the abdomen. It is recommended for men with very large prostates.
- Laser treatment: The laser uses intensive light to cut (enucleate) or vaporize the prostate tissue. During the procedure, only a small amount of blood is lost.
- Prostate stents: Stents are used to keep the urethra open and improve the flow of urine. They are mainly recommended for men who are not fit for surgery.
- Transurethral needle ablation (TUNA): This is a minimally-invasive procedure which uses heat (radiofrequency energy) to harden parts of the prostate tissue. The aim is to reduce the prostate volume and to improve the symptoms.
- Transurethral microwave therapy (TUMT): This is a minimally-invasive procedure which uses microwave energy to harden parts of the prostate tissue. The aim is to reduce the prostate volume and to improve the symptoms.

What is retrograde ejaculation?

This means that the semen will not go through the urethra during orgasm but it will be projected into the bladder and leaves your body afterwards when you urinate. You may have retrograde ejaculation after surgery for BPE. It is also associated with some types of drug treatment.

Is there a relationship between surgical treatment and erectile dysfunction?

In most cases, surgery will not cause erectile dysfunction.

What if you are unable to urinate (urinary retention)?

If urinary retention develops and you are not able to urinate, an indwelling catheter is inserted for a few days until you can urinate on your own. Depending on how health care is organized in your country, the catheter is placed by your family doctor, the urologist, or at the emergency unit of the hospital.

How can I cope with lower urinary tract symptoms associated with BPE?

BPE is a very intimate and private condition. However, there are many ways to keep the symptoms associated with BPE under control. They should not stop you from being happy in your relationships and participating in the social, cultural, and economic life of your community.

Seek help if your symptoms bother you: consult your family doctor, general practitioner, or a urologist.

More information?

You can read more about the different treatment options for BPE in these sections:

- Watchful Waiting
- Drug treatment
- Surgical treatment

More information? You can read more in the section [Living with BPE](#).

This information was updated in September 2013.

This leaflet is part of EAU Patient Information on BPE. It contains general information about benign prostatic enlargement. If you have any specific questions about your individual medical situation you should consult your doctor or other professional healthcare provider.

This information was produced by the European Association of Urology (EAU) in collaboration with the EAU Section of Uro-Technology (ESUT), Europa Uomo, and the European Association of Urology Nurses (EAUN).

The content of this leaflet is in line with the EAU Guidelines.

You can find this and other information on urological diseases at our website: <http://patients.uroweb.org>

Series contributors:

Prof. Thorsten Bach	Hamburg, Germany
Prof. Alexander Bachmann	Basel, Switzerland
Prof. Dr. Christopher Chapple	Sheffield, United Kingdom
Prof. Louis Denis	Antwerp, Belgium
Mr. Günter Feick	Gehrden, Germany
Prof. Stavros Gravas	Larissa, Greece
Dr. Hashim Hashim	Bristol, United Kingdom
Prof. Rolf Muschter	Rotenburg, Germany
Dr. Cosimo De Nunzio	Rome, Italy
Mr. Hans Ransdorp	Bussem, The Netherlands
Prof. Jens Rassweiler	Heilbronn, Germany
Ms. Maria Russo	Orbassano, Turin, Italy
Dr. Roman Sosnowski	Warsaw, Poland
Prof. Andrea Tubaro	Rome, Italy