

How it's performed - Transurethral resection of the prostate (TURP)

A transurethral resection of the prostate (TURP) is carried out in hospital under anesthetic. You'll usually need to stay in hospital for 1 to 3 days.

Preparing for surgery

You'll usually be asked to attend a pre-admission appointment a few weeks before your operation so a doctor or nurse can make sure the operation is suitable for you and that you're well enough to have an anesthetic.

This may involve tests such as blood tests and an electrocardiogram (ECG) to check your general health. An ECG is a simple test to check the electrical activity of your heart.

You can also use this appointment as an opportunity to ask any questions about the procedure and discuss any concerns you have.

Make sure you tell your doctor or nurse if you're currently taking medication to prevent blood clots, such as warfarin, rivaroxaban, aspirin or clopidogrel.

These medications could cause heavy bleeding during surgery, so you may be advised to stop taking them in the lead-up to your operation.

If you smoke, you should try to cut down or give up completely before your operation, as this can help reduce your risk of potentially serious complications such as chest infections and blood clots.

Read more advice about stopping smoking.

Before the procedure

You'll usually be asked to come into hospital on the day of the operation or the day before.

You'll be asked to stop eating and drinking around 6 hours before surgery. Depending on the results of your pre-admission assessment, you may be given compression stockings to help prevent blood clots.

Just before the operation is carried out, you'll be given an anesthetic to stop you feeling any pain during the procedure. The type of anesthetic used may be either:

a general anesthetic – this means you'll be unconscious throughout the procedure

a spinal or epidural anesthetic – this means you'll be awake during the procedure but won't be able to feel anything below your waist

The operation

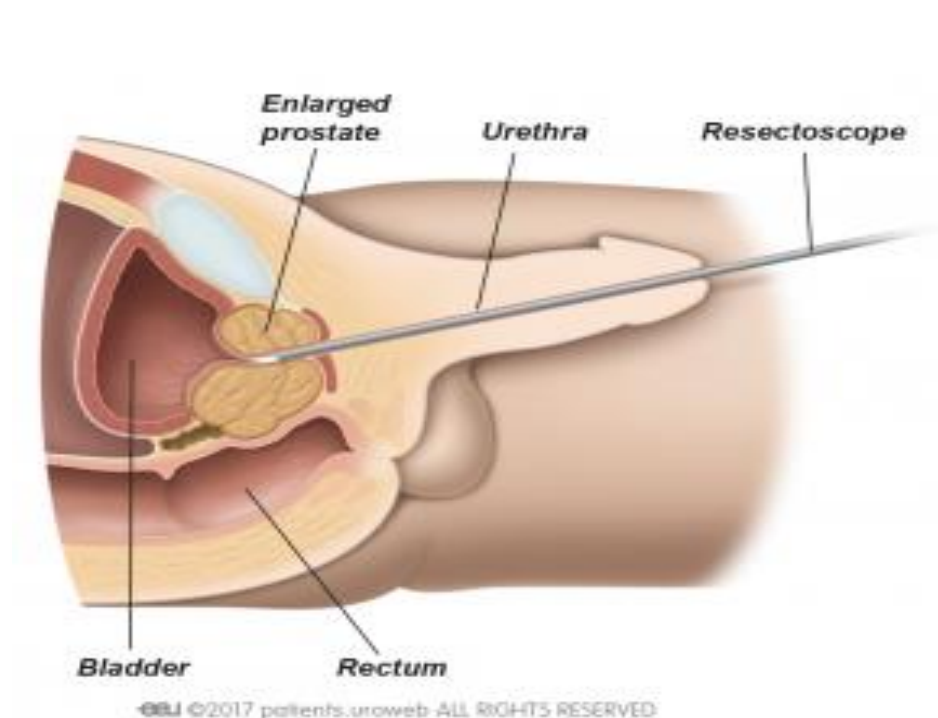
A TURP is usually carried out using a device called a resectoscope. This is a thin metal tube containing a light, camera and loop of wire.

The surgeon will insert the resectoscope into your urethra (the tube that carries urine out of the body) before guiding it to the site of your prostate with the help of the light and the camera.

An electric current is used to heat the loop of wire, and this is used to cut away a section of your prostate. After the procedure, a catheter (a thin, flexible tube) is used to pump fluid into the bladder and flush away pieces of prostate that have been removed.

A TURP can take up to 1 hour, depending on how much of your prostate needs to be removed.

Once the procedure has been completed, you'll be moved back to your hospital ward so you can recover. The catheter will be left in place for a few days until you're able to pee normally.



Recovery

Following a transurethral resection of the prostate (TURP), you may need to recover in hospital for 1 to 3 days before you can go home.

While in hospital, you may be given fluids directly into a vein (intravenously) until you've recovered from the anaesthetic and are able to eat and drink.

You shouldn't experience any severe pain, but there may be some discomfort and bladder spasms (contractions) from the catheter, which is left in place because your urethra (the tube that carries urine out of the body) will be swollen and sore.

Before you're discharged, you'll be given advice about your recovery. A follow-up appointment to check your progress should be made for a few weeks later.

Peeing after TURP

You won't be able to pee normally at first because your urethra will be swollen.

The catheter used to flush out your bladder during the operation will be left in place for a while to allow you to pee until the swelling goes down.

During the day after the operation, water may be pumped through the catheter to clean your bladder and get rid of any blood clots and other debris.

This usually is not painful, but may make your bladder feel uncomfortably full.

The catheter may be removed to check if you can pee before going home.

It's normal to find peeing uncomfortable and difficult to control for at least a few days after the catheter is removed.

If you still cannot pee, a catheter may need to be put back in.

You'll be able to go home with the catheter still in place, and an appointment will be made to remove it a few days or weeks later.