The main worry with a patient who has had a prostatectomy is that he may become incontinent. The only time that this could happen would be in the first few days after the operation when the bladder muscle may still be a bit over-active. This is usually due to the fact that it has had to push very hard for a long time past the prostate gland.

What can I do to prevent any fear of being wet?
Since it takes the over-active bladder a few days to relax after the prostatectomy you can prevent any accidents with wetting by strengthening the perineal muscles. Before the catheter is taken out, the nursing and medical staff will instruct you in these exercises.

Should I drink all the time when I am in hospital?
When the catheter has been removed you should begin drinking when you wake up in the morning. Do not drink after the evening meal since this may cause increased frequency at night, thus losing the benefit of a good night's sleep.

How much urine can I expect to pass after the catheter has been removed?
This will depend very much on the amount of fluid that you can consume but should be somewhere between 2-4 pints per day. It is important that you keep all urine passed for the nursing staff to examine and measure.

When will I be fit to go home?
When a patient has had a transurethral prostatectomy he usually goes home, on average, about the 3rd or 4th day after operation. If there has been an open operation then there will be a wound and your stay may be 2-3 days longer.

How will I feel when I get home?
It is important to remember that you have had a major operation. This is easy to understand if you have a surgical wound but, when the patient has had a transurethral prostatectomy, he often feels that he has avoided a "real" operation by not having a wound. Since the object of the operation is to remove the prostate gland, it does not matter what method the surgeon used; the patient will still feel the effects of a major operation. Consequently, it will take about 2-3 weeks before you begin to feel back to your old strength again. Do not overdo things in that period or you will become excessively tired.

If you are still working then you will need a further 2-3 weeks off work depending on how heavy your job is. If you are retired then gradually do a little more each day but do not overdo things!

Are there any complications I should look for when I get home?
Principally there are two complications which you should watch for in the first 2-3 weeks after discharge:

- **Blood in the urine:**
  In the mornings, when you first pass urine, there may be a slight tinge of blood. This is normal and should clear away as you start drinking during the day. Gradually this color will fade. Should there be any sudden reappearance of a heavy blood discoloration then you should drink about two pints of fluid quite quickly and contact your general practitioner who may prescribe an antibiotic.

- **Discomfort passing urine:**
  If there is any burning or stinging pain when you are passing urine then this may mean that there is some infection. You should contact your doctor who may prescribe treatment.

We hope that this question and answer booklet will provide most of the answers to any worries or doubts that you have. If there are any more then the nursing staff and the doctors will be happy to answer them.
What is a prostate gland and what does it do?
The prostate gland is a small fleshy structure which lies just below the bladder. It surrounds the tube (urethra) which drains the urine from the bladder. The gland has two parts. There is an outer skin (capsule) and inside this there is the gland proper which grows as a man ages. Since it surrounds the urethra, its increasing size will tend to narrow the urethra, and make it more difficult for a man to pass urine.

Why do I need a prostatectomy?
Most men experience some slight degree of narrowing of the urethra by the prostate gland but the symptoms produced do not cause them too much difficulty and they are prepared to put up with this. However, about one man in ten will require prostatectomy because the difficulty with passing urine gets progressively worse.

Operation 1:
This is called a Trans-urethral Prostatectomy (TURP for short) and is the operation that is used for 80-90% of glands that require treatment. In this operation the surgeon will remove all the obstructing prostate tissue but will leave the capsule intact. He does so by introducing a telescope instrument along the penis until he can see the obstructing prostate gland. This instrument (resectoscope) will remove the blocking gland in slices until all the obstruction is relieved. Most surgeons aim at removing all the prostate tissue. The benefit of this type of operation is that the patient does not have a wound which can be painful. He can be up and about the next day and pain-free.

Operation 2:
This second operation is reserved usually for prostate glands which are very large. The operation is an Open Prostatectomy and is performed in 10-15% of cases of prostatic obstruction. In this operation the surgeon will make a skin incision in the lower part of the abdomen and the gland will be removed either by an incision in the capsule or through an incision in the bladder itself. Since there will be a skin incision, there may be stitches or clips to be removed at 5-7 days after the operation.

Will I feel any pain?
The short answer to this is No. You will receive an anesthetic for the operation. This will be a spinal anesthetic when the anesthetist will give you a small injection into the lower back which has the effect of making you lose all sensation and movement from the waist downwards. This effect lasts for 4-6 hours and the sensation and movement will return fully after that time.

How long does the operation take?
From the time you arrive in the operating theatre until the time you are back in the theatre recovery room, is usually about 45 minutes.

How will I feel like when I wake up?
There will also be a plastic tube in the penis, a catheter, which is there to remove the urine and blood from the bladder. Since the prostate has been removed by cutting away there is always a raw surface inside where the gland was situated. This area tends to bleed and may produce blood clots. These clots would block the urethra and must be removed by the catheter.

Frequently the catheter is irrigated by a salt solution to prevent clots from forming. The catheter in the penis will give you the sensation that you want to pass urine. You should try to relax and resist this sensation since the catheter is removing urine from the bladder. Relaxation at this time will help a lot. If this sensation is too uncomfortable for you then you will be given an injection to relieve the discomfort.

When will the catheter be removed?
As soon as the urine is clear of any blood then the catheter can be removed safely. This usually happens 48-72 hours after the operation. The surgeon will not remove the catheter before until the urine is clear of blood-staining. In order to achieve this you will be encouraged to drink large amounts of fluid commencing on the day after the operation. This may mean an extra 2-4 liters of fluid per day and is the only way in which the urine can be cleared of blood staining.

How can I manage to drink all that fluid?
It is not necessary to gulp down large volumes of fluid. This will tend to make you feel bloated and even nauseous. Instead you should take frequent sips of fluid steadily throughout the day. In this manner it will surprise you how much fluid you can get through in the day.

What kind of fluid?
Water is probably the best but many men find that this is boring and unpalatable. Fruit juices may be used to vary taste but, if you are diabetic, make sure that they do not contain sugar. Fizzy drinks can also be used to vary the fluids but they should not be taken in excess since they too can cause a bloating feeling due to excess gas content.

What will passing urine be like after the catheter has been removed?
Since there is still a raw surface of prostate inside, the first couple of times that you pass urine will feel a bit “nippy” or “stingy”. Thereafter there should be little discomfort. You may notice some blood from time to time, especially if you have been asleep over night and have not been able to drink any fluid. The urge to pass urine may be quite commanding for the first few times and you may feel that you cannot reach the toilet in time. Fortunately, the bladder learns very quickly that it does not need to push so hard and this urgency to get to the toilet will stop.

Will I be able to control my urine?
Yes.