Urolift® with median lobe resection for trilobar BPH

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ABSTRACT

Introduction and Objective: Urolift® is a minimally invasive surgical treatment for men with lower urinary tract symptoms (LUTS) secondary to benign prostatic hyperplasia (BPH). Currently, it is contraindicated in patients with a median lobe. With this video, we demonstrate an example of our initial experience with Urolift for patients with trilobar BPH.

Materials and Methods: JW, 67 years old male with a long history of LUTS, with an AUA-SS of 20. His symptoms were improved with Tamsulosin, but he did not tolerate retrograde ejaculation associated with it. Work-up included UA, PSA, prostate US (43 grams) and cystoscopy, which showed obstructing lateral lobes and a large median lobe. He was counseled on different options, and elected for the above procedure, citing his high concern for retrograde ejaculation and desire to be off medication.

Results: The surgery was performed in an outpatient setting, with no need for a Foley catheter. At one-month follow-up Tamsulosin was stopped, and the patient was experiencing voiding symptoms improvement. At three months he reported extreme satisfaction with the procedure. His AUA-SS improved by 30% off medications and he denied any sexual side effects.

Conclusions: Urolift® is a good treatment modality for patients with BPH, even in the presence of an obstructing median lobe—which can be easily addressed with a simple TUR. This video is an example of our initial experience, with short-term follow-up. More data and longer follow-up are needed, in the hope that with this video the indications of the procedure may be expanded—meeting the concern of many of our patients about sexual side effects caused by BPH treatment modalities.

CONFLICT OF INTEREST

None declared.

ARTICLE INFO

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