



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.

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