

BENIGN PROSTATIC HYPERPLASIA

Patient Information Fact Sheet

›What is BPH?

Benign prostatic hyperplasia (BPH) is the name given to enlargement of the prostate gland. This enlargement is believed to be caused by the effects of male sex hormones. Rarely symptoms of BPH occur before the age of 40, but more than 50% of men in their sixties and as many as 90% in their seventies and eighties have some symptoms of BPH. Some men begin to have difficulty in passing urine because the enlarged prostate gland presses against the urethra, the tube leading from the bladder. This causes the urethra to narrow, obstructing urine flow from the body. Your doctor will check your symptoms, check the size of your prostate, and may carry out a blood test.

›What is the prostate gland?

The prostate is a small gland found at the base of a man's bladder. It is about the size of a chestnut and sits around the urethra, through which urine passes. The role of the prostate is not understood fully. It is believed to assist in the production of semen.

›What are the symptoms of BPH?

- Having to rush to the toilet
- Difficulty in starting to urinate
- A weak stream of urine
- Stopping and starting urinating
- Dribbling in underwear
- Discomfort when urinating
- Urinary incontinence
- Having to urinate more often
- Feeling that your bladder has not emptied properly
- Having to get up several times at night to urinate
- Sudden inability to urinate

›Is BPH a type of cancer?

BPH is not a type of cancer. Some of the symptoms of BPH and prostate cancer are similar, but having BPH does not mean that you have cancer of the prostate or that you will develop this type of cancer later on. However, if ever you notice blood in your urine or semen, you should tell your doctor.

›How is BPH treated?

If symptoms of BPH are interfering with your life, there are several drugs your doctor can prescribe to try to improve them. Alpha-blockers are a type of drug that relax the muscle in the urethra, opening up the tube and letting urine flow out more easily. This type of medicine works within weeks.

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Examples include **alfuzosin** (Uroxatrol), **doxazosin** (Cardura), **silodosin** (Rapaflo), **tamsulosin** (Flomax), and **terazosin** (Hytrin). A group of drugs known as the 5-alpha reductase inhibitors (eg. **dutasteride** [Avodart] and **finasteride** [Proscar]) may also be used to treat BPH. With this type of medicine, at least six months' treatment may be necessary to assess whether a beneficial effect has been achieved. A combination tablet containing the alpha-blocker **tamsulosin** and the 5-alpha reductase inhibitor **dutasteride** (Jalyn) is also available.

Some men with BPH suddenly find they are completely unable to empty their bladder, even though they feel like they want to urinate. If this happens to you, you may need to go to hospital so that a catheter or tube can be inserted into your bladder to let the urine flow out. You may need medication (as described above) or an operation to relieve the blockage. The most common operation for BPH is a transurethral resection of the prostate (TURP). Under anesthesia, an instrument is passed up the tube toward the bladder, and part of the prostate gland is removed from the inside.

›Will BPH affect my sex life?

There is no reason why you should not continue having sex. BPH is unlikely to affect your sex drive. However, if you do experience problems, you should always see your doctor.

›Self-Help

- If you need to go to the toilet often, don't drink before going to bed, an important meeting or event, or when traveling
- When going to a new place or traveling, try to locate where the toilets are as soon as you can, in case you need them quickly
- Keep a note of the number of times you have to go to the toilet, especially how often you have to get up during the night to urinate, in case your doctor asks for this information
- Take all medicines exactly as directed by your doctor and do not share them with anyone else

›Further information

National Kidney and Urologic Diseases Information Clearinghouse: www.kidney.niddk.nih.gov

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