Benign Prostatic Hyperplasia (BPH)

Benign prostatic hyperplasia is a noncancerous enlargement of the prostate gland. By middle age, your prostate gland enlarges normally as new cells grow and old cells do not die. It is not known what causes these growths, but they may be related to hormonal changes that occur with aging. When the prostate is enlarged, it pushes against the urethra and the bladder affecting the flow of urine.

Background Information on BPH

It is possible to have prostate enlargement and prostate cancer at the same time, but it is important to remember that prostate enlargement is not prostate cancer. In addition, having benign prostatic hyperplasia (BPH) does not seem to increase your chances of developing prostate cancer.

Over 12 million Americans suffer from the effects of BPH. By age 60, more than half of all American men have microscopic signs of BPH, and by age 70, more than 40% will have enlargement that can be felt on physical examination. The size of the prostate does not always determine how severe the obstruction or how severe the symptoms will be. Some men with greatly enlarged glands have little obstruction and few symptoms, while others whose glands are less enlarged may have more blockage and greater problems.

Symptoms: Men with BPH may experience difficulty initiating a urine stream or maintaining urination, an increased need to urinate frequently, powerful urges to urinate, and the feeling that the bladder is never completely empty. If the prostate enlarges too much, urinary tract infections may develop and lead to possible kidney damage.
Follow-up and Treatment Options for BPH

The treatment or therapy depends on the severity of symptoms and degree of enlargement. Below is a listing of potential treatment options for BPH. The main treatments for BPH are either to “watch and wait,” medication or surgery. Only a physician can determine the most appropriate treatment.

Watchful Waiting: If your symptoms are considered mild, then this is usually the best option. Medication or therapy is not recommended. You should continue to have an annual exam so that your physician can monitor the growth. Your physician may also recommend certain lifestyle changes such as increasing physical activity.

Drug Therapy: If your symptoms are considered moderate, this is usually the best option. Two types of drugs are used: one to relax the prostatic-urethral muscle thereby improving urinary flow, and the other to help shrink the prostate.

Surgery: If your symptoms are severe, surgery is usually the best option. There are several types of surgery that are available to relieve the symptoms of BPH. Although prostate surgery has a high success rate, it also has a higher rate of complications than drug therapy. There are three common types of surgery.

- Transurethral Resection of the Prostate (TURP): This procedure accounts for more than 90% of all BPH surgeries. TURP relieves symptoms quickly, typically doubling the urinary flow within weeks. This procedure involves removing the urethra’s lining and bits of excess prostate tissue to expand the urethra.
- Transurethral Needle Ablation (TUNA): Uses radio frequency energy to kill excess prostate tissue.
- Prostatectomy: A portion of the prostate gland is surgically removed to relieve pressure on the urethra.

Questions to Ask Your Healthcare Provider

- Are there any other tests that we need to perform?
- What treatment do you suggest?
- What are the benefits of this type of treatment?
- What are the risks and side effects of this treatment option?
- What are the steps after treatment?
- What are the chances of recurrence after my treatment plan?

Sources for Additional Information

- American Cancer Society: www.cancer.org
- National Cancer Institute: www.cancer.gov
- CancerCare: www.cancercare.org

The content on this handout is provided to you as general information and not intended as a diagnosis. Please consult with your physician regarding the essential details about your condition.