Urolift: Good flow without sacrificing performance

Dr Ronny Tan

Specialist Urologist, Advanced Urology

A man's ability to hold his urine, to go whenever he wants and as quickly as he needs to is often taken for granted till the prostate enlarges to a certain degree to cause blockade to the otherwise smooth urinary flow. At the same time, his ability to perform in the bedroom also make take a hit as he matures in age.

No doubt the conditions mentioned above, namely lower urinary tract symptoms (LUTS) and erectile dysfunction (ED), are not directly related to each other. However, the treatment of LUTS can have an effect on ED. The common factor of these 2 conditions is age. As a man grows older and become more accomplished in life, his urinary stream and his penile erections are no longer as strong as before. Common LUTS include storage versus voiding symptoms. Storage symptoms include inability to hold his bladder, need to go when the urge comes, frequent trips to the toilet, urinary leak and waking up after bedtime to pass urine. Voiding symptoms include slow stream, interrupted stream, difficulty in starting to pass urine, feeling of incomplete bladder emptying and dribbling of the urine at the end of the stream. LUTS is more often than not caused by benign prostate hypertrophy (BPH). Up to 40% of men would have BPH once they cross the age of 50 and this can increase up to 70% in men above the age of 70. BPH is not prostate cancer. It is a benign disease but the symptoms are bothersome enough to affect a man's quality of life. The trips to the toilet in the middle of the night not only affects his sleep but also his partner's.

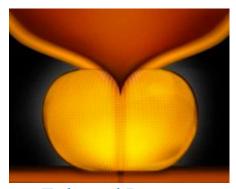
Current treatment for BPH range from lifestyle modifications to oral medications and surgeries. Oral medications have been shown to improve LUTS but there are significant side effects on the man's erectile and ejaculatory function. Men on these prescription medications complain of decreased volumes of semen during ejaculation or even dry orgasms. Erections are also noted to be weaker and in worse cases even absent! Hence men who are still sexually active have to decide between an improved urinary stream and sexual performance. Untreated BPH can result in bladder failure which in turn can lead to kidney impairment. Once bladder failure sets in, even surgery would have a poor outcome.

Current surgeries performed for BPH include transurethral resection of prostate (TURP) and transurethral laser vaporization of prostate (TUVP). Both procedures would create a good channel for adequate flow of urine and the patients can be taken off medications after undergoing surgery. The main concern after these surgeries would be the inability to ejaculate. Almost all men who undergo TURP or TUVP would not be able to ejaculate. Some have painful orgasms and even ED. Again, these symptoms would not be acceptable to the sexually active man.

Prostatic urethral lift using the Urolift system would bridge the gap in terms of treatment of BPH for sexually active men who are either not keen to take long-term medications or are unable to accept the side effects of medications and surgery. Urolift has be shown to be good treatment outcomes without the unwanted side effects of sexual dysfunction. Unlike other procedures, there is no damage done to the prostate tissue. As a result, irritative symptoms like painful urination after the procedure would be less common.

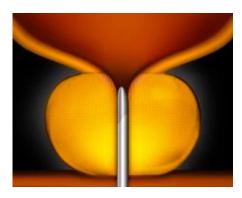
Urolift is a procedure that is performed as a day surgical procedure. Urolift has been FDA approved since 2013 and is currently available in Singapore. These implants are placed via a small scope inserted into urine tube (urethra) opening up the channel without the need to remove any tissue. It is akin to drawing open the curtains to let more light into the room. The Urolift implants draws apart the obstructing prostate tissue to enable urine to flow out from the bladder. Typically, 4-6 implants will be placed depending on the configuration of the prostate. Most men who undergo Urolift treatment would not need to have a urinary catheter placed and they can return to their daily activities much quicker. Sexual function is not compromised to achieve resolution of bothersome urinary symptoms and long-term medications can be stopped.

Not all men are suitable for the Urolift procedure and proper evaluation would have to be carried out by a urologist. These investigations would include uroflowmetry test and flexible cystoscopy.



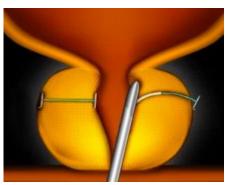
Enlarged Prostate

An enlarged prostate can narrow or even block the urethra.



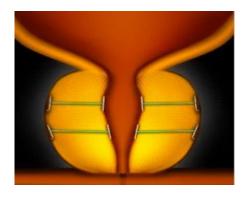
Step 1

The UroLift Delivery Device is placed through the obstructed urethra to access the enlarged prostate.



Step 2

Small UroLift Implants are permanently placed to lift and hold the enlarged prostate tissue out of the way and increase the opening of the urethra.



Step 3

The UroLift Delivery Device is removed, leaving an open urethra designed to provide symptom relief.