

PETER M. HUGHES, M.D.
Adult and Pediatric Urology
526 Glen Street
Glens Falls, New York 12801
Telephone: (518) 792-5340 • Fax: (518) 792-5908

POST TRANSURETHRAL PROSTATE SURGERY INSTRUCTIONS (TURP)

Your recent prostate surgery requires very special post hospital care. Despite the fact that no skin incisions were used, the area around the prostate is quite raw and is covered with a large scab to promote healing and prevent bleeding. Certain precautions are needed to insure that this scab is not disturbed over the next six weeks while the healing proceeds.

Because of the raw surface around your prostate and the irritating effect of urine you may expect frequency of urination and/or urgency (a stronger desire to urinate) and perhaps even more getting up at night. This will usually resolve or improve slowly over the healing period. You may see some blood in your urine over the first six weeks. It may occur even if the urine was clear for a while, do not be alarmed. Get off your feet and drink lots of fluids until clearing occurs (water is best). If you start to pass clots or don't improve, call us.

DIET: You may return to your normal diet immediately. Because of the raw surface, alcohol, spicy foods, acidic foods and drinks with caffeine may cause irritation or urinary frequency and should be used in moderation. To keep your urine flowing freely and to avoid constipation, drink plenty of fluids during the day (8-10 glasses, water is best). Tip: Avoid Cranberry juice, it is very acidic!

ACTIVITY: Your physical activities are to be restricted, especially during the first one to two weeks. During this time use the following guidelines:

- a. No lifting heavy objects (anything greater than 10 lbs).
- b. No driving a car and limit long car rides.
- c. No strenuous exercise, limit stair climbing to a minimum.
- d. No sexual intercourse until okayed by one of your doctors.
- e. No severe straining during bowel movements-take a laxative if necessary.

BOWELS: It is important to keep your bowels regular during the post-operative period. The rectum and the prostate are next to each other and any very large and hard stools that require straining to pass can cause bleeding. You will be given stool softeners (usually) but these are not laxatives. A bowel movement every other day is reasonable. Use a mild laxative if needed, such as Milk of Magnesia 2-3 tablespoons, or 2 Dulcolax tablets. Call if you continue to have problems.

MEDICATION: You should resume your pre-surgery medications unless told not to. In some cases you may be given an antibiotic to prevent infection and stool softeners. These should be taken as prescribed until the bottles are finished unless you are having an unusual reaction to one of the drugs. You may take Tylenol or Motrin for pain and discomfort. These medications do not contain narcotics and are tolerated better, that is fewer side effects.

-OVER-

PROBLEMS YOU SHOULD REPORT TO US:

- Fevers over 100.5 Fahrenheit.
- Heavy bleeding, or clots (See notes above about blood in urine).
- Inability to urinate.
- Drug reactions (Hives, rash, nausea, vomiting, diarrhea).
- Severe burning or pain with urination that is not improving.

FOLLOW-UP: You will need a follow-up appointment to monitor your progress. If you weren't given one when we scheduled the surgery, please call for this appointment at the number above when you get home. Usually the first appointment will be about 3-4 weeks after your surgery.