

Procedure Information Sheet – Transurethral Convective Radio Frequency Water Vapour Thermal Therapy of Prostate (Rezum)

Hosp No. :	HKID No.:
Case No. :	
Name :	
DOB :	M / F
Adm Date :	
Contact No. :	

1. Introduction

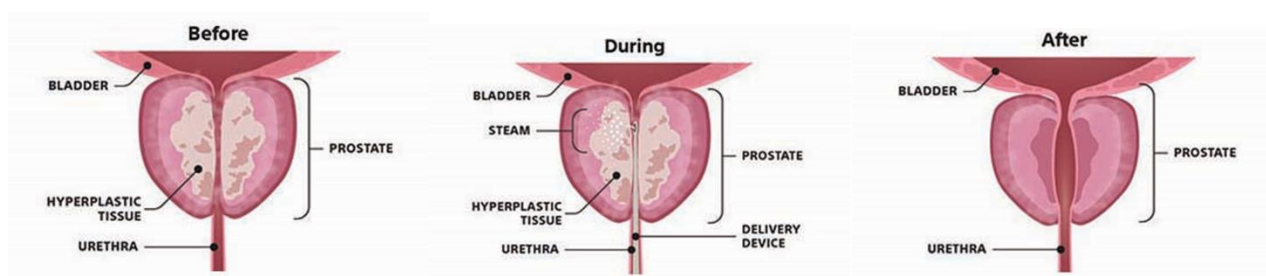
- 1.1. Benign prostatic hyperplasia (BPH) is a common urological condition characterized by progressive increased in the size of the prostate gland. It is a disease of ageing, caused bladder outflow obstruction (BOO), which results in lower urinary tract symptoms, which have significant affected on the patient 's quality of life (QOL).
- 1.2. Transurethral Convective Radio Frequency Water Vapour Thermal therapy of prostate (Rezum) is a minimally invasive operation, an alternative options which uses thermal energy for treatment of BPH.

2. Indication

- 2.1 Transurethral convective radio frequency water thermal therapy is a treatment for the BPH patients 50 years old or older with prostate volume, which is larger than 30g and less than 80g.

3. Operative Procedures

- 3.1. Rezum is a minimally invasive surgery, performed under monitor anaesthetic care or local anaesthetic.
- 3.2. It is a new technology, used targeted controlled water vapour energy (steam) to shrink size of prostate over a period of time.



4. Preparation Before the Operation

- 4.1. Patient will keep fasting for 6-8 hours before operation as instructed by doctor.
- 4.2. Your doctor will discuss the operation in details before signing the consent.
- 4.3. Inform your doctor of any medical condition (for example diabetes, heart diseases, high blood pressure, etc. and any medications you are currently taking.
- 4.4. Anti-coagulants like Plavix, aspirin may need to stop 5 days before the operation.
- 4.5. Your doctor will prescribe a dose of antibiotic injection before the operation to prevent infection

5. Risk and Complications

General:

- 5.1. Hematuria
- 5.2. Hemospermia
- 5.3. Dysuria

Specific:

- 5.4. Urinary tract infection
- 5.5. Inflammation of epididymis
- 5.6. Urinary frequency
- 5.7. Urinary retention

6. Post –Operative Care After Operation

- 6.1. **Foods and drink:** Patients resume diets after few hours of operation. However, for those patients cannot eat well after surgery, intravenous fluid will be given in order to maintain nutrients and hydration.

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- 6.2. **Urinary catheter:** A urinary catheter, from urethra to urinary bladder, is placed for 5-7 days after surgery. Patients are home with urinary catheter. They need to learn how to care of the urinary catheter before discharge.
- 6.3. **Wound pain control:** it is normally to feel uncomfortable or painful in the first few days after the operation. Patients can control pain by oral, intramuscular or intravenous pain killers medications after surgery.
- 6.4. **Medications:** The medications are discharged as prescribed by doctor to relieve of urinary tract discomfort.
- 6.5. **Ambulation:** patients are encouraged to mobilize after the surgery. Vigorous exercise should be avoid for the first few weeks after the procedure.

7. Follow Up

- 7.1. Patient will follow up as scheduled after operation. If serious events develop after discharge, patient should contact your doctor in-charge or go to the nearest Accident and Emergency Department.

8. Remarks

- 8.1. This is general information only and the list of complications is not exhaustive. Other unforeseen complication may occasionally occur. In special patient groups, the actual risk may be different. For further information, please contact your doctor.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature: _____

Patient/ Relative Name: _____

Date: _____

