

A COMPARATIVE STUDY OF MEDICAL VERSES SURGICAL MANAGEMENT OF BENIGN PROSTATIC HYPERPLASIA

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ABSTRACT

Introduction

Benign Prostatic Hyperplasia (BPH) is a disease suffered almost universally by aging men. Last 25 years has seen a phenomenal improvement in the treatment options of BPH, which includes both medical and surgical therapy. Medical treatment has come to stay because of the limitations of prostate surgery in elderly persons with various co-morbidities or unwilling for surgery. However surgery still remains best treatment of choice, with Transurethral Resection of the Prostate (TURP) being the gold standard procedure.

Materials and Methods

A total of 100 consecutive patients attending the outpatient department of Surgery of a tertiary care institute of Mumbai with symptom suggestive of BPH were selected for study after taking prior informed consent. Out of 100 patients, 50 were chosen for surgery in the form of TURP and rest 50 were considered for medical treatment (α -1 antagonists). All the Patients were followed up for 12 months and improvement was noted in the form of International Prostate Symptom Score (IPSS) and Peak Urinary Flow Rate (PUFR).

Results

The mean age of patients in medical treatment group was 66.40 ± 9.27 years and in surgical treatment group was 64.72 ± 8.38 years. The Mean baseline IPSS score and PUFR (ml/s) of the patients in medical group was 12.4 ± 1.65 and 10.0 ± 0.87 while the mean values after 12 months follow up period were 6.5 ± 1.79 and 14.6 ± 1.15 . The Mean baseline IPSS score and PUFR (ml/s) of the patients in surgical group was 19.5 ± 3.7 and 8.84 ± 0.86 while the mean values after 12 months follow up period were 2.32 ± 0.89 and 17.4 ± 1.51 . The results showed significant improvement in patients after both medical and surgical management ($p < 0.01$). On comparing baseline and follow up IPSS scores and PUFR values of both groups, we found more significant improvement ($p < 0.01$) in patients after surgical management.

Conclusions

Medical treatment should be offered to those patients who are not willing or are unfit for surgery or having early symptoms of prostatism. In spite of the associated post-operative morbidity in few elderly patients after surgery, of all treatment options, prostate surgery offers the best chance of symptomatic improvement with TURP being the gold standard procedure.

KEYWORDS: Benign Prostatic Hyperplasia, Medical Management, Surgical Management