

Rezūm Therapy is a minimally-invasive, non-surgical treatment for men with symptoms of an enlarged prostate, commonly known as Benign Prostatic Enlargement (BPH). Rezūm uses the water vapour to remove enlarged prostate tissue that is compressing the urethra and disrupting the flow of urine from the bladder. During the treatment, sterile water vapour is released at targeted locations throughout the prostate. When the steam contacts the prostate tissue, all the stored energy is released into the tissue. Over a period of 2 weeks to 3 months, your body absorbs the treated tissue, shrinking the prostate. With the extra tissue removed, the urethra opens, reducing BPH symptoms.

PREPARATION FOR THE PROCEDURE >

Medications to avoid prior to the procedure

You **may** be asked to stop any medications that affect bleeding prior to surgery. If you are asked to stop these medications, the following medications should be stopped 7 days prior to surgery: ASA (Aspirin/Entrophen), warfarin (Coumadin), clopidogrel (Plavix), dipyridamole (Aggrenox), ticagrelor (Brilinta), ibuprofen (Advil/Motrin) and other non-steroidal anti-inflammatories (NSAIDs); and the following medications should be stopped 72 hours prior to surgery: dabigatran (Pradaxa), rivaroxaban (Xarelto) and apixaban (Eliquis). If you have any questions about your medications prior to surgery, please contact your surgeon.

Diet prior to the procedure

You may eat your normal diet up until midnight the night before your surgery. Do not eat any solid food, milk or cream after midnight the night before your surgery. Do not drink fluids after midnight the night before your surgery. You may have sips of water with your morning medications.

THE PROCEDURE >

In the procedure room

Rezūm is performed under sedation, meaning you will be very drowsy for the procedure. The procedure is performed through a small telescope placed through the urethra (the tube that allows passage of urine from the bladder). There are no incisions. A catheter will be inserted into the bladder at the end of the procedure. The procedure typically takes 5 minutes, depending on the size of the prostate.

Potential risks and complications

Although the procedure is very safe, a number of potential risks exist. These include the following:

- Bleeding
- Infection
- Temporary inability to urinate
- No improvement in your urinary symptoms
- Bladder irritation causing increased frequency and urgency of urination
- Burning during urination which, in some patients, may last several weeks
- Scarring along the opening of the bladder, requiring additional treatments in the future
- Regrowth of prostate tissue
- Retrograde ejaculation (the ejaculate falls backward into the bladder instead of forward out the penis, and is released during the next urination); the risk is less than 5%

WHAT TO EXPECT AFTER THE PROCEDURE >***During your stay in the surgical centre***

- **Length of hospitalization:** You can return home the day of your surgery.
- **Pain:** Most patients experience no pain and require no pain medication.
- **Diet:** You will be able to resume your normal diet after your surgery.
- **Ambulation:** You are encouraged to walk around shortly after your surgery.

After leaving the hospital

- **Showering:** You may shower the day of your surgery. You may take a bath after your catheter has been removed.
- **Activity:** Walking is strongly encouraged after your surgery. Prolonged lying in bed should be avoided to prevent the development of blood clots in your legs. You should avoid heavy lifting, sports, vigorous activity or sexual activity for 2-4 weeks.
- **Diet:** You may resume your normal diet once you have returned home.
- **Work:** Most people can return to work 2-3 days after the procedure if they perform desk work or jobs with minimal physical activity. If your work requires heavy lifting or strenuous activity, you may be required to avoid work for 2 weeks.

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- **Antibiotics:** You may be given a prescription for antibiotics to take after your procedure to prevent infection.
 - **Catheter:** You will have a catheter (a tube draining urine from your bladder) after your procedure. You will be able to go home with the catheter attached to a urine drainage bag. A home care nurse may be coordinated to help with catheter care, if needed. Your catheter will typically be left in for 5-14 days, depending on the size of your prostate. If you are unable to urinate after the tube is removed, it may need to be reinserted in order to empty your bladder. It is normal to experience some cramping in the bladder while the catheter is in place.
 - **Pain:** Most patients experience minimal pain and require no prescription pain medication. Any pain from the procedure can usually be controlled with Tylenol (acetaminophen).
 - **Follow-up appointment:** Your surgeon will contact you to schedule removal of your catheter. You will also need an appointment to visit your surgeon 4-12 weeks after your procedure. Please call your surgeon to schedule this appointment if it has not been done for you before your discharge from the surgical centre.
 - **Urinary symptoms:** It is not unusual to have burning with urination, increased frequency and urgency of urination and some blood in the urine for 2-4 weeks after the procedure.

WHEN TO SEEK MEDICAL CARE >

Contact your surgeon if you experience any of the following after the procedure:

- Bright red urine or large blood clots in the urine that does not clear with increased fluids
- Inability to pass urine
- Your drainage bag is not filling with urine

Proceed immediately to the emergency room if you experience any of the following after the procedure:

- Difficulty breathing or shortness of breath
- Unexplained fever over 38.5 degrees Celsius/101 degrees Fahrenheit
- If you are unable to urinate
- You have a serious concern and are unable to contact your surgeon

If you have any questions or concerns, you may email rezum@scarboroughurology.com.