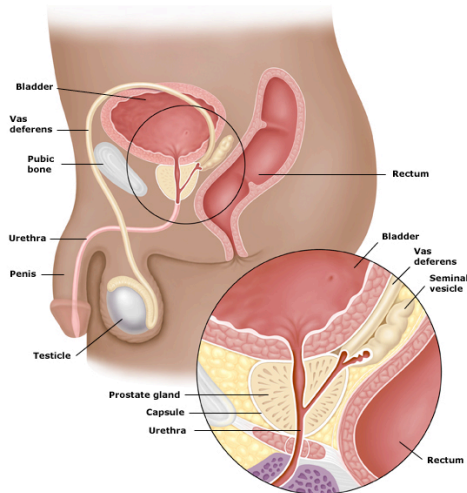


## PATIENT INFORMATION TRUS BIOPSIES OF PROSTATE

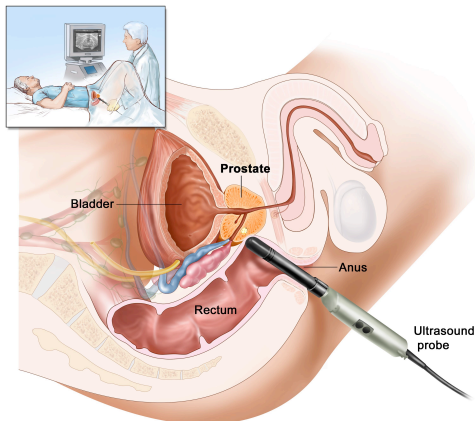
You have been referred for a transrectal ultrasound guided prostate biopsy. This leaflet should provide you with some information on what to expect when you attend for your appointment.

The prostate is a gland about the size of a walnut at the base of your bladder surrounding the urethra (tube that carries urine and semen out of your body). Its main function is to produce a thick liquid and nutrient, which is mixed with your sperm to become semen.



### What is a prostate biopsy and transrectal ultrasound?

An ultrasound device uses high frequency sound waves to create images of internal body structures. Your prostate can be visualized easily with a small ultrasound probe inserted into your back passage (rectum). This is a transrectal ultrasound or TRUS.



Guided by the pictures created by the ultrasound probe we will be able to insert a special needle into various parts of your prostate to obtain small tissue samples (prostate biopsies). The cells that have been taken will be sent to a pathologist for detailed microscopic examination.

### Why do I need a prostate biopsy?

You have been advised to have a prostate biopsy because:

- Your doctor has found a lump or abnormality during a rectal finger examination of your prostate
- You have had a blood test showing a high level of PSA (prostate-specific antigen). PSA is a protein released into your blood from your prostate gland. High levels of PSA may indicate the presence of prostate cancer cells.

With a biopsy and the subsequent microscopic examination of the specimen we will be able to determine whether your prostate may harbour cancer cells, but we will also be able to diagnose conditions such as benign prostatic hyperplasia (enlargement of the prostate), prostatitis (inflammation of the prostate) or prostatic intraepithelial neoplasia (PIN), which is a change in the cells of your prostate that could lead to prostate cancer.

Having a prostate biopsy is currently the only method available to make a diagnosis of your symptoms.

### What risks are involved?

Although serious complications are rare, every procedure has risks:

- **Infection (~2%):** Since the biopsy needle passes through your rectum (which is not sterile) there is a risk that bacteriae will be carried into your prostate and cause an infection at the biopsy site. We administer powerful antibiotics before and after the procedure to minimize the risk of an infection. However, if you develop a fever, or have pain or a burning sensation when passing water, you need to either contact us or your nearest A&E department immediately.
- **Bleeding into the urethra or bladder:** you should expect slightly blood stained urine for up to 2 weeks after the biopsies. This is usually harmless and will subside spontaneously. However, in the unlikely event that you should pass blood clots or feel that you cannot empty your bladder at all, you need to contact us or your nearest A&E department immediately.
- **Bleeding from the rectum:** This is common during the first 2-3 days after the biopsy and usually does not need any treatment.

- **Blood stained ejaculate:** This is very common since your prostate produces most of the fluid present in your ejaculate. You will first notice fresh red blood, later slightly rust stained semen for a couple of weeks. This is harmless and does not require any treatment.
- **Allergic reaction:** the risk of an adverse reaction to the antibiotics administered during the procedure is very low (<0.1%). Please let us know, whether you are allergic to any substances.

### Before the biopsy

Before having the biopsy, you should let the doctor or nurse know if you

- are taking any medicines, particularly antibiotics or anticoagulants (blood-thinning medication) such as aspirin, warfarin, clopidogrel or plavix
- Have allergies to any medicines or anaesthetics
- Have or had bleeding problems
- Have an artificial heart valve

You should continue to take all of your medicines as normal, unless the doctor that organised your biopsy has told you otherwise.

***Please note, that we usually advise patients to stop blood-thinning medication one week prior to the biopsies to reduce bleeding complications. However, please do not stop any medication without notifying us first.***

### What anaesthetic will I have?

The biopsy will usually be taken under a local anaesthetic. An anaesthetic gel will numb your rectum, - a small dose of a local anaesthetic will be injected next to your prostate to ensure that you will not feel any pain during the procedure.

### During the biopsy

The biopsy will be carried out as a day case procedure.

About 30 min prior to your biopsy we will administer two antibiotics.

Inside the biopsy room you will lie on your left side with your knees tucked up against your chest. The ultrasound probe will be inserted into your rectum using a special anaesthetic gel. Once inside your back passage we will take pictures of your prostate and take certain measurements. We will apply more local anaesthetic and we will take around 10 biopsies with a specially designed biopsy device that contains a spring-loaded needle

and will be inserted through the ultrasound probe.

The entire procedure should not take longer than approximately 10-15 min.

### After the biopsy

We will usually keep you under observation for about 1 ½ hours. You will receive a light snack and drinks and we want to make sure that you do not feel light-headed or uncomfortable before leaving the hospital. We also want to make sure that you can pass water without difficulties before going home. You will receive further antibiotics to take to prevent an infection. You will be asked to rest for about four hours at home and you should take it easy for the next two days and avoid heavy physical activities.

### When you are at home

You may have mild discomfort in the biopsy area for one or two days after the procedure. You may also notice some blood in your urine for up to three weeks and blood in your stool for up to two weeks. Your semen may be discoloured (pink or brown) for up to six weeks after the biopsy. This is all normal and nothing to worry about.

You should

- avoid alcohol for 24 hours as this interacts with one of the antibiotics given before the biopsies
- drink plenty of non-alcoholic fluids while you have blood in your urine

### Your results

The biopsy results should be available in 14 days and we will contact you as soon as possible. We will discuss the results and any further tests or treatment that might become necessary in detail at the time of your follow-up appointment.

In case of any further questions please do not hesitate to contact us on any of these numbers:

Yale Hospital 01978 29 1306

Mr Christian Seipp, Consultant Urological Surgeon 01978 72 7183 (sec. Gemma Williams)