

Treatment options

These will depend on what the doctor/urologist finds on diagnosis and can vary from a course of medication to surgery or a combination of both. Each case is different, so the best treatment needs to be selected on an individual case basis.

It is important to discuss in detail the treatment, any possible side effects and long-term outcomes and to understand which particular treatment has been chosen and what can be done to ensure it is successful.

Medical Treatment

A number of medicines are available to treat BPH. Some of the medicines can lower blood pressure but there are options for men with low blood pressure too.

Some of the medicines are not generally funded but can now be funded with a special authority application.

Surgical Treatment

Surgery may be necessary for those who don't respond to medications or for those with severe symptoms.

The doctor may recommend a transurethral resection of the prostate (TURP) which is not regarded as major surgery and involves removing some of the prostate tissue to improve urine flow through the urethra.

There are also at least 3 different options for laser prostatectomy which also improve urine flow. Newer minimally invasive options are also being developed but not all are available in New Zealand as yet.

Lifestyle Changes

Some suggested changes in lifestyle may help improve some BHP symptoms:

- Reducing fluid intake, particularly before going to bed
- Limit tea coffee and alcohol
- Use a voiding plan
- Avoiding other medications that can affect BPH

BPH and prostate cancer

There is an important distinction: **BPH is NOT prostate cancer.** However, it is possible for a man to have both BPH and prostate cancer.

Prostate cancer, in the early stages typically has no symptoms, but if symptoms develop they are often similar to those of BPH.

This is why it is important to have regular prostate checks from the age of 50 whether there are any symptoms or not. If there is any family history of prostate cancer (eg sibling, father, grandfather, uncle) then there is a higher risk to a man of having prostate cancer. Men with family history should begin being checked from 40 years of age.

Testing for prostate cancer involves having a PSA blood test and also a DRE (digital rectal examination) physical assessment of the prostate gland.

Prostate cancer is very treatable if diagnosed in the early stages when confined to the prostate gland. Men are encouraged to discuss having regular tests with their doctor.

Some facts about prostate cancer in New Zealand:

- Prostate cancer is the most commonly diagnosed cancer in men.
- More than 3000 men are diagnosed and over 600 die of prostate cancer every year.
- About the same number of men die of prostate cancer as women die of breast cancer.

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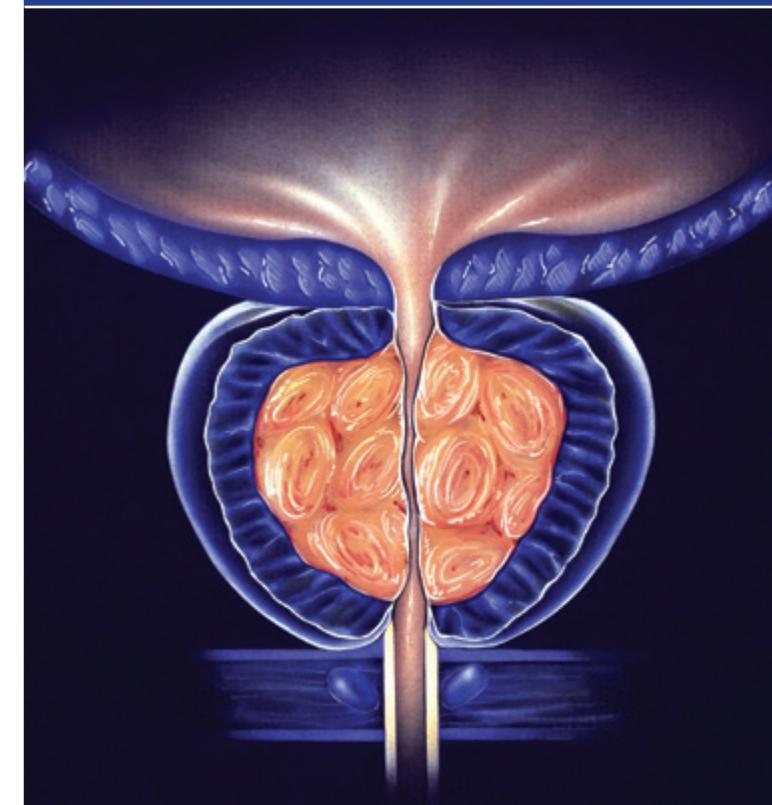
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Understanding BPH

(Benign Prostatic Hyperplasia)



What is the Prostate Gland?

1 IN 8 MEN WILL GET PROSTATE CANCER IN THEIR LIFETIME

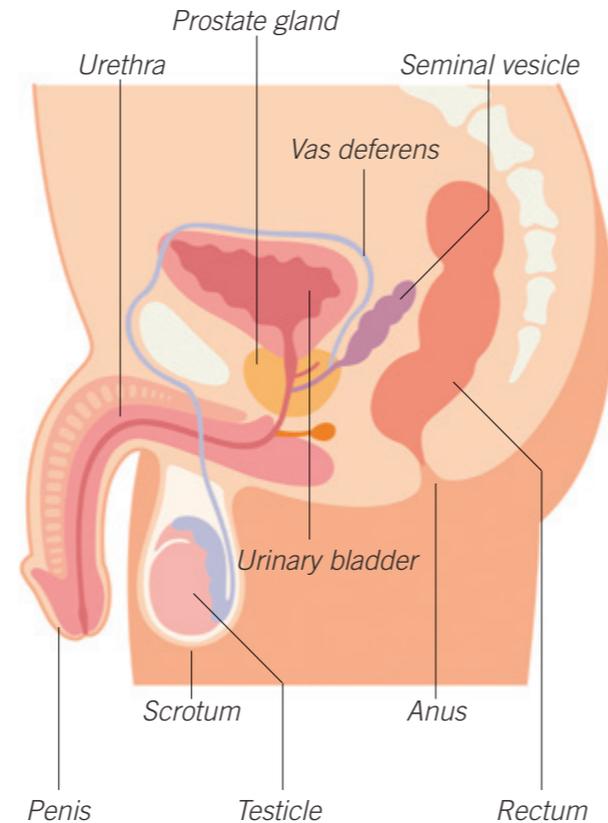
Only men have a prostate. It is a small gland that sits below the bladder near the rectum. It surrounds the urethra, the passage in the penis through which urine and semen pass.

The prostate gland is part of the male reproductive system. It is made up of muscular and glandular tissues and its main function is to produce most of the fluid that makes up semen that enriches sperm. The prostate needs the male hormone testosterone to grow and develop.

The prostate is often described as being the size of a walnut in young men but is typically more like a plum by the time men are middle-aged.

From about the age of 40 a man's prostate begins to enlarge and create a condition called Benign Prostatic Hyperplasia (BPH). The likelihood of developing BPH increases with age and eventually 80% of men have enlarged prostates but many will never have symptoms.

Sometimes, however, this can cause problems, such as difficulty urinating but are not always symptoms or signs of cancer.



What is BPH?

Quite simply it is enlargement of the prostate gland but the reasons for it are not fully understood.

Typical symptoms of BPH are:

- A weak urinary stream
- Difficulty starting urination
- Frequent urination
- Difficulty postponing urination
- Waking frequently at night to urinate
- Stopping and starting while urinating
- Blood in urine
- Pain or burning on urination.

Taking action

If any of these symptoms are present men should consult their doctor. List out the symptoms, noting down the ones that are evident and also record details such as the number of times for urination during the night.

What will the doctor do?

For a doctor to confirm a diagnosis of BPH they will assess the symptoms and also conduct a digital rectal examination (DRE) to feel if the prostate is enlarged or has any other abnormality.

They will also order a PSA blood test which is a useful indicator about what might be happening with the prostate gland.

The doctor may also make a referral to a consultation with a urologist, a specialist in diagnosing and treating prostate problems.

If a DRE indicates possible BPH several other tests may be carried out by the urologist. These include a urine flow test to determine if the kidneys and bladder are functioning properly.

**BENIGN
PROSTATIC
HYPERPLASIA** **NOT MALIGNANT
OR CANCEROUS
TO DO WITH THE
PROSTATE
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OR SWELLING**

