

Patient Education for Prostate Biopsy

Key Points

Transrectal ultrasound-guided biopsy of the prostate is done to check for prostate cancer. There is, at present, no more reliable way than biopsy to check for prostate cancer.

General information about the procedure

Before your procedure, please tell a member of the medical team if you have:

- an implanted foreign body (stent, joint replacement, pacemaker, heart valve, blood vessel graft)
- A regular prescription for a blood thinning agent (warfarin, aspirin, clopidogrel, rivaroxaban or dabigatran, etc.)
- A present or previous urinary tract infection; or have had a recent medical illness or infectious disease.

What does this procedure involve?

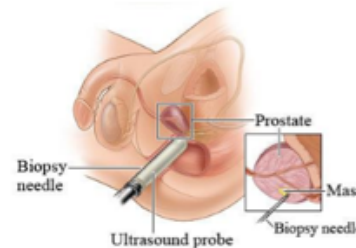
Placing an ultrasound probe into your rectum (back passage) to scan your prostate. Using ultrasound to guide the process, 12 or more biopsy samples are taken from your prostate with a special needle passed through the ultrasound probe.

What happens on the day of the procedure?

Your urologist (or a member of their team) will briefly review your history and medications and will discuss the procedure with you to confirm your consent.

Details of the procedure

- We normally carry out the procedure under local anesthetic with sedation, although, occasionally, we do it under a regional/general anesthesia.
- Before the procedure, we will give you an antibiotic injection (depending on local infection control policy),
- We ask you to undress, change into a gown and lie on an examination table.
- We normally examine your prostate first, by rectal examination, before inserting the ultrasound probe.
- The probe is as wide as a man's thumb and approximately 10 cm (four inches) long.
- In most patients, we take biopsies from the prostate by passing a special biopsy needle through



- Before we take any biopsies, we inject local anesthetic around your prostate to reduce any discomfort.
- The biopsy needle is a spring-loaded device which makes an audible "click" each time it is activated.
- We normally take 12 to 18 biopsy samples; for saturation biopsy, we usually obtain 24 sample cores

- At the end of the procedure, your prostate may feel "bruised".
- The procedure takes 30 to 45 minutes to perform.
- You should expect to go home on the same day of your procedure, or within 24 hours or more if needed

What is your risk of a hospital-acquired infection?

Your risk of getting an infection in hospital is approximately **8 in 100 (8%)**. The risk is lower for "outpatient" procedures but higher if you are in a "high risk" group of patients such as patients who have had:

- long-term drainage tubes (e.g. catheters);
- bladder procedures;
- long hospital stays or multiple hospital admissions







What can you expect when you get home?






- You will have some blood in your urine which may last several days.
- We advise you to drink plenty of fluid to help stop this bleeding.
- The bleeding from your back passage may go on for several days, but if you have continual dripping of blood, you need to urgently seek medical treatment.
- You may see blood in your semen for up to six weeks.
- You will be given advice about your recovery at home.
- You will be given a copy of your discharge summary.

- You will normally be given antibiotics; any other medication you may need will be arranged and dispensed from the hospital pharmacy.
- Your attending urologist will be informed about the results as soon as possible, and we will arrange an outpatient appointment for you to discuss what action is needed.

Are there any after-effects?

The possible after-effects and your risk of getting them are shown below. Some are self-limiting or reversible, but others are not. We have not listed very rare after-effects (occurring in less than 1 in 250 patients) individually. The impact of these after-effects can vary a lot from patient to patient; you should ask your surgeon's advice about the risks and their impact on you as an individual:

After-effect	Risk
Please note: the after-effects listed below are seen only if you have had prostate biopsies taken	
Blood in your urine	 Almost all patients
Blood in your semen which can last for up to six weeks (this poses no problem for you or your sexual partner)	 Almost all patients
Blood in your stools (from your bowel)	 Almost all patients
Discomfort in your prostate from bruising due to the biopsies	 Between 1 in 2 & 1 in 10 patients
Infection in your urine requiring antibiotics	 1 in 10 patients (10%)
Temporary problems with erections caused by bruising from the biopsies	 1 in 20 patients (5%)

Bleeding which makes you unable to pass urine (clot retention)	 1 in 50 patients (2%)
Septicaemia (blood infection) requiring emergency admission for treatment	 1 in 50 patients (2%)
Failure to detect a significant cancer in your prostate	 Between 1 in 10 & 1 in 50 patients
Bleeding in your urine or bowel requiring emergency admission for treatment	 1 in 100 patients (1%)
Need for a repeat procedure if biopsies are inconclusive or your PSA level rises further	 Between 1 in 50 & 1 in 250 patients

In the event of the following three situations, you should immediately go to Al Wakra Hospital's Emergency Department:

- If the bleeding in your urine or bowel does not stop or increases with added clots;
- If you are unable to pass urine (having urinary retention);
- If you have episodes of high fever (usually with chills and rigor).

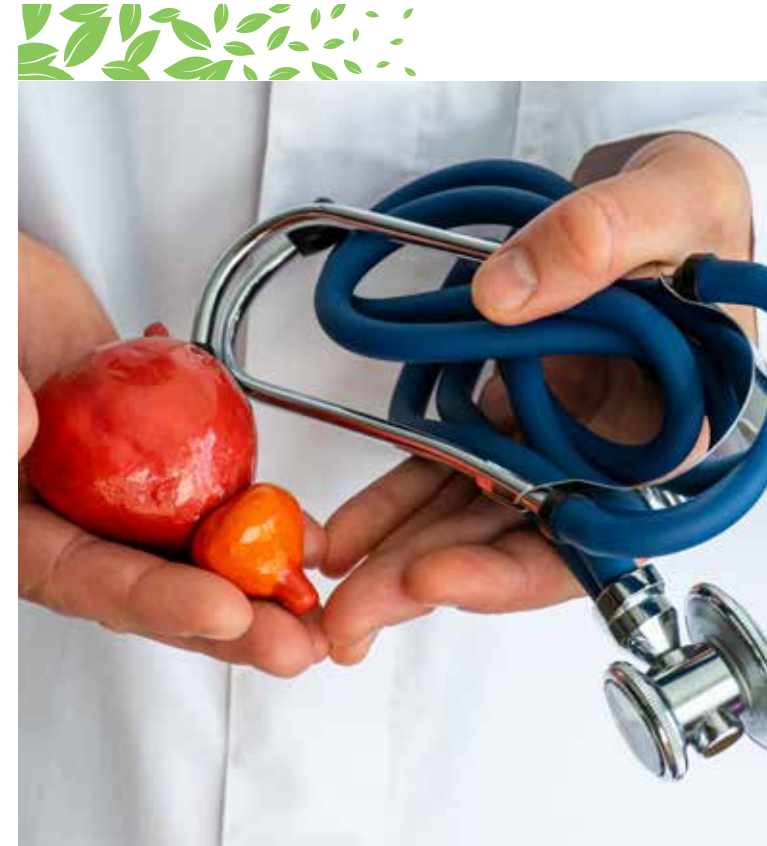
Patient and Family Education

- @ patienteducation@hmc.org.qa
- ☎ 4439 1494 / 5

© 2019 Hamad Medical Corporation

19-0588

Urology Department Patient Education for Prostate Biopsy



مستشفى الوكرة
Al Wakra Hospital

عضو في مؤسسة حمد الطبية
A Member of Hamad Medical Corporation