

SALVAGE HOLEP FOR RECURRENT BPH

Hypothesis / aims of study

Application of HoLEP technique in removing recurred adenoma has rarely been demonstrated. We would like to present our video clips of HoLEP procedure which was done in patients with recurred BPH after previous procedures. We hope that the audience can get some anatomical insight into the frequent location of recurred adenoma. Also we would like to demonstrate salvage HoLEP procedure in recurred BPH is feasible and effective.

Study design, materials and methods

We retrospectively reviewed video record database of HoLEP from nine patients where the HoLEP procedure was performed by a single surgeon (sj).

Results

Previous conventional procedures consisted of 6 cases of TURP, 2 cases of PVP and one case of TUNA. A total of nine patients after salvage HoLEP were followed up for average 12 months. Postoperative significant increase in maximum flow rate and decrease in symptom score were noted. There was no intra-operative or postoperative complication except minor capsule tearing which reviewed by catheter indwelling in one case.

Table. Results of outcomes in nine patients with recurred BPH

	Preoperative				Postoperative			
	Qmax (ml/sec)	PVR (ml)	IPSS		Qmax (ml/sec)	PVR (ml)	IPSS	
			Total	QoL			Total	QoL
Case 1	15.4	203	22	5	22.0	0	3	0
Case 2	9.3	44	19	5	28.0	43	12	4
Case 3	7.5	68	10	3	15.4	3	2	1
Case 4	17.1	0	17	6	9.9	0	7	1
Case 5	16.0	44	26	4	34.0	0	7	2
Case 6	3.9	36	40	5	21.2	54	10	1
Case 7	7.0	70	21	4	35.0	67	8	2
Case 8	4.0	100	35	6	24.3	39	NA	NA
Case 9	7.2	109	19	4	26.1	34	NA	NA

Interpretation of results

We learned that there was significant remnant tissue around verumontanum in recurrent BPH, which might be predominantly responsible for recurrent obstructive symptoms. It usually is a concerning problem with conventional procedures when surgeon tries to remove apical tissue in which urinary sphincter is very near. Also, we found that lateral lobes were also incompletely removed by previous conventional procedures. Significant amount of tissue in the lateral lobes near prostatic capsule tend to remain especially in larger prostate.

Concluding message

Even in recurred BPH, enucleation of adenoma along anatomical plane was feasible. HoLEP procedure was effective and safe treatment option for recurrent BPH following conventional procedure.

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Is this a clinical trial?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	Yes
Specify Name of Ethics Committee	Seoul National University Hospital
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	No