

DR. SON'S POINT: A CYSTOSCOPIC LANDMARK FOR ENDOSCOPIC PROSTATE SURGERY

Introduction

The anterior prostate should be handled carefully, because this area consists of relatively thin structures and has transpassing vessels. No anatomical landmark was described in the anterior prostate around the bladder neck. To describe the structure of the 12 o'clock area in the anterior prostate to facilitate endoscopic surgery, we suggest a surgical landmark, named the "Dr.Son's point: S-point".

Design

The S-point is an inflection point resulting from a protruded lateral lobe of the prostate in the 9-12 (right) or 12-3 (left) o'clock direction and can be identified through cystoscope by looking upwards in the 1-1.5cm or more distal from the bladder neck. The S-point can be used as the starting point or cystoscopic upper margin of lateral lobe.

From January 2008 to December 2008, 94 patients who received Photoselective vaporization of prostate with Lithium triborate (PVP-LBO) were included in the database for retrospective analysis. All patients underwent general urological standard evaluations (i.e. digital rectal examination (DRE); transrectal ultrasound (TRUS); prostate-specific antigen (PSA) test; uroflowmetry (UFM) and post-void residual urine (PVR) assessment; International Prostate Symptom Scale and Quality of Life (IPSS-QoL) questions; urodynamic studies). At postoperatively 1 month, 3 months, and 6 months, uroflowmetry with post-void residual urine and IPSS-QoL were surveyed. All prostates were operated below the S-point, using it as a landmark of the anterior prostate around the bladder neck.

Results

There have been improved outcomes in voiding parameters with 6 month follow-up. Although the long term follow-up is a demanding process, there have been no cases of bladder neck contracture or stress urinary incontinence in our series as of now. Furthermore, S-points allow the anterior prostate to be more easily accessible, thus facilitating the operations. The S-point is only a landmark, not an absolute criterion. There are no comparable and long-term data for evaluating the utility of the S-point.

Conclusion

The S-point can be a certain cornerstone in the beginning of a surgical operation, as well as an anatomical limit. The S-point is a landmark that is easily detected and helpful in endoscopic prostate surgeries.

References

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Is this a Randomised Controlled Trial (RCT)?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	Yes
Specify Name of Ethics Committee	the IRB of Seoul National University Hospital (06-2009-34)
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes