

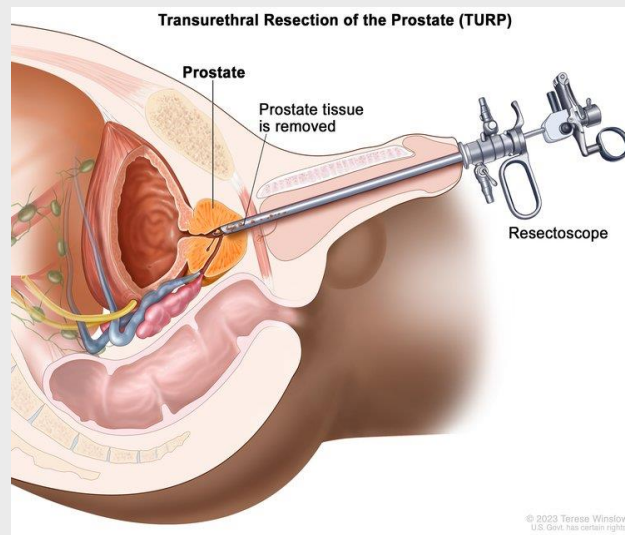
Comparison of Complications and Outcomes Following Transurethral Resection of the Prostate in Patients With and Without Acute Urinary Retention

Muhammad Raheel

Department of Urology, Leicester General Hospital,
UHL NHS Trust

Background

Benign prostatic hyperplasia (BPH) is the most common cause of bladder outlet obstruction. Transurethral resection of the prostate (TURP) remains the gold standard. Patients presenting with acute urinary retention (AUR) may face higher complication rates. This study aimed to compare outcomes of TURP in AUR vs. non-AUR patients.

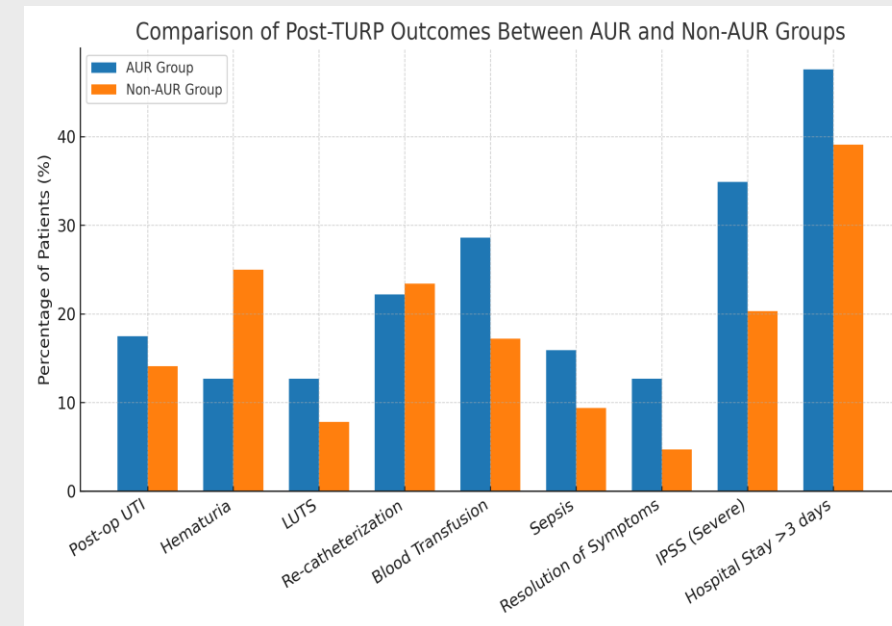


Methods

- Descriptive study at IKD, Hayatabad Medical Complex, Peshawar (Aug 2023 – Feb 2024)
- 127 male patients (>40 yrs, prostate size 40–80g)
- Exclusion: prior prostate surgery or prostate cancer
- TURP was performed on all patients
- Post-op complications assessed: UTI, haematuria, LUTS, re-catheterization, sepsis, hospital stay
- Statistical analysis: IBM SPSS v23

Results

- 63 patients (49.6%) presented with AUR
- UTIs ($p=0.39$), haematuria ($p=0.06$), LUTS ($p=0.27$), re-catheterization ($p=0.52$), and sepsis ($p=0.20$) were more frequent in the AUR group
- Need for blood transfusion is higher in AUR ($p=0.09$)
- No statistically significant differences
- Hospital stay and symptom resolution were comparable in both groups



Implications

- AUR patients tended to have higher complication rates, but differences were not statistically significant
- TURP outcomes are largely similar between groups
- Larger prospective studies needed to confirm findings and assess long-term outcomes
- Identifying patient-specific risk factors may optimize management