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PREDICTORS OF BLADDER NECK CONTRACTURE AFTER HOLEP FOR BPH PATIENTS

Hypothesis / aims of study

The incidence of bladder neck contractures (BNC) after HOLEP has been reported to be 0.35-5.0%. We evaluated the factors that predict the occurrence of this complication, BNC after HOLEP for BPH patients.

Study design, materials and methods

We analyzed the medical reports of 310 BPH patients underwent HOLEP by single surgeon, retrospectively. We investigated the incidence of BNC after HOLEP, and compared the risk factors of BNC according to its occurrence. The patient's age, preoperative PSA, prostate volume, timing of surgery, operative time, the presence of prostate calculi on TRUS, and presence of prostatitis on HOLEP pathology were used as predictors.

Results

Tracking during the endoscopic procedure requiring the incidence of BNC, 17 patients (5.48%) occurred, and the average duration of endoscopic treatment for BNC was 7.8 months (2.6 to 17.8), respectively. BNC occurred in the group of preoperative PSA levels were lower (1.19 ng / ml vs. 1.72 ng / ml), in the group of the prostate was small (29.5cc vs. 38.8cc), in the group of prostate calculi (84.6% vs. 56.0%), and in the group of presence of prostatitis on HOLEP pathology (29.8% vs. 9.1%) ($p < 0.05$). There was no significant difference according to the patient's age, timing of surgery, operative time ($p > 0.05$).

Interpretation of results

Concluding message

High preoperative explanation is required for the risk of postoperative bladder neck contracture in BPH patients of lower PSA levels, smaller prostate, presence of prostate calculi, and presence of prostatitis on HOLEP pathology.

Disclosures

Funding: none **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics Committee:** Kosin University Hospital **Helsinki:** Yes **Informed Consent:** Yes