



Ejaculation Preserving Middle Lobe Only–Transurethral Resection and Vaporization of the Prostate: 12 Year Experience

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INTRODUCTION & OBJECTIVES

- Transurethral resection of the prostate (TURP) is the most common and effective surgical method to treat lower urinary tract symptoms (LUTS) secondary to benign prostatic hyperplasia (BPH)
- Adverse sexual events, primarily ejaculatory dysfunction (EjD), occur in 40-60% of patients
- We hypothesized that for men with LUTS secondary to intravesical-prostatic protrusion (IPP) a middle-lobe only TURP (MLO – TURP) would not only provide improvement in symptoms but also preserve ejaculation
- We report the long-term safety and efficacy data on middle-lobe only TURP (MLO – TURP)

MATERIALS & METHODS

- 312 consecutive patients who underwent an MLO – TURP between 2005-2017
- Inclusion criteria: acute urinary retention or significant LUTS and a minimum IPP of 10
- Efficacy parameters: International Prostate Symptom Score (IPSS), Quality of Life (QoL), Peak flow rate (Q_{max}), Post-void residual urine (PVR), International Index of Erectile Function (IIEF), and ejaculatory function, which was assessed by the Male Sexual Health Questionnaire (MSHQ)
- Adverse events: blood transfusions, post-operative incontinence, and the need for subsequent therapy

	Baseline N = 312	1 year N = 297	5 year N = 253	12 year N = 167
IPSS	18.6	7.4**	8.9**	7.7***
Q_{max}	8.7	17.6**	16.5**	15.3**
PVR	112	78*	64*	69*
QoL	4.7	2.3*	2.5**	2.3***
IIEF	16.5	17.7	18.4	19.3

Table 1: Outcomes after MLO – TURP

Data presented as mean values unless stated otherwise. * P < 0.05, ** P < 0.01, *** P < 0.001

	Baseline N = 312	5 year N = 2
MSHQ – EjD	8.8	10.4
Bother from EjD	2.4	1.27

Table 2: Ejaculatory Function after MLO – TURP

RESULTS

- Average prostate volume was 80 grams (range 30-178 grams)
- 8 (2.6%) patients developed EjD after the procedure
- Improvements in IPSS, QoL, Q_{max} and PVR were durable throughout the 12-year, follow-up period
- No significant post-operative change in erectile function
- No significant deterioration of MSHQ – EjD at 5 years
- Small improvement in bother from EjD at 5 years
- No reports of incontinence after the procedure. One patient required a blood transfusion and 4 (1%) patients developed meatal stenosis
- At 5 years, 14 (5.5%) patients were on alpha blocker, 29 (9.2%) were on a 5-alpha reductase inhibitor, and 6 (2 %) were on an antimuscarinic medication
- Seven (2.2 %) patients required a second procedure

CONCLUSIONS

- MLO – TURP is a safe and effective treatment for men with LUTS.
- Patients experience long-term improvement in symptoms and preserve antegrade ejaculation.
- In select men with prominent middle lobes, MLO – TURP should be considered a therapeutic, ejaculation-sparing option