**OBJECTIVE**

- Transurethral Resection of Prostate (TURP) is considered a gold standard procedure for BPH.
- Complications such as bleeding, urinary infection, bladder wall injury and TUR syndrome are commonly reported.
- UTI is the most common complication.
- The rate of UTI following Monopolar or Bipolar TURP is as common as 4.1-6.2% and 2.6-8.4%, respectively (Omar et al. BJU. Jan 2014).
- We aimed to evaluate the risk factors predicting for fever after TURP surgery at our institution.

**METHODS**

- Retrospective descriptive study.
- Urology department, Rambam Health Care Campus, Haifa, Israel.
- Post-operative Fever (>38 degrees Celsius) during the first 7 days following the procedure.
- Variables: Presence of permanent catheter, Diabetes Mellitus (DM), Prior antibiotic Treatment, pre-operative urine culture, Prostate Size and combined cystolithotripsy with TURP.

**RESULTS**

- 177 patients underwent TURP during the study period.
- All patients received antibiotic prophylaxis:
  - 83 patients with negative urine culture were treated empirically with IV Amikacin + Ampicillin.
  - 94 patients with positive urine culture were treated according to sensitivity profile.
- 9/177 (5.1%) patients developed post-operative fever.

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Risk Factor</th>
<th>No. (%)</th>
<th>Post-operative Fever</th>
<th>P-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Permanent catheter</td>
<td>Yes</td>
<td>59 (33.3%)</td>
<td>8 (4.7%)</td>
<td>0.4775</td>
</tr>
<tr>
<td>- No</td>
<td>118 (67.6%)</td>
<td>4 (3.4%)</td>
<td>0.1623</td>
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</tr>
<tr>
<td>- Preoperative Urine Culture</td>
<td>Positive</td>
<td>94 (53.1%)</td>
<td>8 (8.5%)</td>
<td>0.0375</td>
</tr>
<tr>
<td>- Negative</td>
<td>83 (46.9%)</td>
<td>1 (1.2%)</td>
<td>0.0375</td>
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<tr>
<td>- Combined</td>
<td>Yes</td>
<td>12 (6.7%)</td>
<td>0 (0%)</td>
<td>1</td>
</tr>
<tr>
<td>- No</td>
<td>165 (93.3%)</td>
<td>9 (5.5%)</td>
<td>0 (0%)</td>
<td></td>
</tr>
<tr>
<td>- Diabetes Mellitus</td>
<td>Yes</td>
<td>58 (32.7%)</td>
<td>5 (4.2%)</td>
<td>0.4775</td>
</tr>
<tr>
<td>- No</td>
<td>119 (67.2%)</td>
<td>54 (45.1%)</td>
<td>0.4775</td>
<td></td>
</tr>
</tbody>
</table>

**CONCLUSIONS**

- Prostate size, indwelling urethral catheter pre-OP or Diabetes Mellitus did not predict post TURP fever.
- Preoperative positive culture (if properly treated prior to surgery) and combining cystolithotripsy with TURP did not increase post-operative fever.
- None of the patients who were treated antibiotically a week prior to surgery developed fever (N=16).
- Positive urinary culture prior to TURP is a frequent event.
- In our study, positive urinary culture & smaller prostate size increased the risk of postoperative fever.
- Although positive urinary culture increased the risk of post TURP febrile events, it does not increase the risk of post-OP sepsis.