Royal Cornwall Hospitals
NHS Trust

TURP and HOLEP day case surgery

One + all | we care

Who is this leaflet for?

Prostate surgery is offered for people with a prostate who have difficulty emptying their bladder and suffer with symptoms relating to this. If you cannot pass urine at all and require a catheter (urinary retention), the aim of prostate surgery is to allow you to pass urine without a catheter. This leaflet is for people who are suitable to go home on the same day as the procedure (known as a day case).

What is prostate surgery?

There are several different surgical treatments available. This leaflet is for people having a TURP (Trans-Urethral Resection of the Prostate) or HOLEP (Holmium Laser Enucleation of the Prostate). Your consultant will have assessed your symptoms and prostate in clinic to determine which treatment is more suitable for you. Both types of surgery are designed to widen the channel in your prostate to allow a better flow of urine from your bladder.

Why do I need it?

Not all people with symptoms need surgery – most can be managed with medication. Surgery is usally offered if you:

- have worsening symptoms despite medication
- cannot take or tolerate the medication
- have a catheter – the aim of surgery is to allow you to pass urine without the catheter.

What are the benefits?

Your consultant will discuss with you the risks and benefits of the surgery in clinic and provide a separate information leaflet about the procedure you are having. A day case procedure allows you to go home on the same day and spend the night in your own home. Many patients prefer to be at home in a familiar environment rather than spend the night in hospital.

Are there any alternatives?

Not all people will be able to go home on the same day as surgery. The pre-operative assessment team, along with the anaesthetist and surgeon, will determine whether you will be booked as a day case procedure.

Reasons for a planned overnight stay for monitoring include: other medical conditions (such as heart or lung problems), blood thinners that cannot be stopped for the surgery, living more than an hour from a hospital or not having a friend or relative who can stay with you the night of the surgery.

If you are booked as a day case, there is always the possibility that you will need to stay overnight following the procedure. Reasons for an unplanned overnight stay include: bleeding requiring bladder washes, a prolonged procedure meaning a long anaesthetic or a complication whilst under anaesthetic.

Where will the procedure take place?

HOLEP procedures are performed at the Royal Cornwall Hospital in Truro and at West Cornwall Hospital in Penzance. TURP procedures are currently only performed in Truro, although we are planning to start this service in Penzance in the future. Whilst we aim to book your procedure closest to home, in order to reduce waiting times you will be offered the first available appointment.

How do I prepare for it?

The pre-op assessment clinic will determine if you are medically suitable for a day case procedure. You will need someone to take you to the hospital and collect you. If you live alone then you will need someone to stay with you the night of the operation. You may wish to ask a friend or a relative to stay with you – it is important that this is organised in advance.

What happens afterwards?

At the end of the procedure a catheter will be placed. Following the procedure you will spend about an hour in the recovery room. During this time the urine draining from the catheter will be monitored and you will have bladder irrigation (gentle flow of sterile saline water passed through the catheter and out to the catheter bag) to reduce the risk of any bleeding. You will then be transferred to the ward and the irrigation will be stopped. Following your return to the ward the catheter will be attached to a bag which straps to your leg. This will allow you to get up and out of bed to move around and get back to normal. You will be able to eat and drink.

When will I go home?

There are strict criteria for discharge, which the nursing staff will assess. You will be reviewed by the operating surgeon and provided all is well you will be discharged home with the catheter in place. The nursing staff will teach you how to manage the catheter whilst you are at home.

What follow up will I need?

An appointment will already have been made for you to return to the urology department for the catheter to be removed at least 48 hours after the procedure. You should be informed of this appointment at the same time you are given a date for surgery so that you can prepare in advance.

What can I expect afterwards?

The urine in the catheter bag is likely to alternate between clear and a pink colour. You may find that after sitting for a long period and then moving (or after getting out of bed in the morning) the urine becomes darker with blood. This will clear provided you are drinking plenty of fluids to flush it through.

What should I look out for?

If you experience heavy bleeding or develop clots which block the catheter, seek medical attention.

If you have any concerns during normal working hours (Monday – Friday 8am – 5pm) you can contact the urology clinic on 01872 252220 and speak to a specialist nurse who will be able to give you advice over the phone. If they are concerned they will arrange for the medical team to assess you.

On weekends (8-5pm) you can call the hospital switchboard and ask to be put through to the urology registrar on call. Out of hours contact 111.

If you would like this leaflet in large print, braille, audio version or in another language, please contact the General Office on 01872 252690

RCHT 2001

Printed 05/2023 V1 Review due 05/2026