

TRANSRECTAL ULTRASOUND OF THE PROSTATE AND PROSTATE BIOPSY

REASONS FOR DOING THE PROCEDURE:

Prostate ultrasound may be used to evaluate abnormalities of the prostate tissue or the fluid-containing structures adjacent to it. These abnormalities may be felt by the examining finger during a rectal exam, or suggested by an elevated level of PSA in the blood. If there is suspicion of prostate cancer, a biopsy may also be planned, where a needle is introduced into the suspicious area under ultrasound guidance, and a small piece of tissue (the size of the inside of the needle) is obtained. The pathologist, to determine if cancer or any other abnormality is present, can look at this tissue under the microscope.

PREPARATION:

- 1) Do not take aspirin (or aspirin-containing medications - please look at non-prescription medications carefully), ibuprofen (Advil), naproxen (Aleve), or other "non-steroidal anti-inflammatory drugs (NSAIDs) for 10 days prior to the procedure.
- 2) Do not take vitamins or supplements for 10 days prior to procedure as these can also be blood thinning agents.
- 3) Biopsy cannot be performed when a patient is taking blood thinners such as Plavix or Coumadin (warfarin). If you are taking either of these medications, they will need to be discontinued in advance of the procedure. Please ask your Urologist, and possibly the prescribing doctor, for specific instructions regarding when to stop and when to restart these medicines.
- 4) If biopsy is planned, you will be given antibiotics to take before and after the procedure as directed by your physician.
- 5) You may eat and drink fluids up to the time of your next appointment, but we suggest that you not eat heavily beforehand.
- 6) Two hours prior to your appointment, we ask that you give yourself a Fleet enema (available at the pharmacy), so that the rectum is cleaned of stool. This improves the ability of the ultrasound to provide clear pictures of the prostate, and also reduces the potential risk of infection.

THE PROCEDURE-WHAT TO EXPECT:

Prostate biopsy and ultrasound takes place in our office. After a rectal exam, the ultrasound probe (slightly larger than an examining finger) is introduced into the rectum. The prostate is then thoroughly examined with the ultrasound. If biopsy is warranted, then the needle is introduced through the probe into the rectum, anesthesia is injected into the prostate, and advanced into the area of concern in the prostate. A trigger is then pulled, a snap is heard, and a small core of tissue is obtained.

There may be a sharp sensation with this usually of short duration. With most cases of suspected prostate cancers, six or more biopsies are obtained, in order to evaluate the extent of tumor and to lessen the risk of the needle missing a cancer that is there. When the procedure is done, the probe is removed and the patient is able to return home. Antibiotics are usually continued for one to three days afterward, and we encourage you to drink 2-3 quarts of fluids daily for the next 2-3 days. While there may be some slight aching or soreness in the rectum for 1 to 2 days, this is usually short-lived and pain medications are not usually required.

SIDE EFFECTS AND COMPLICATIONS:

- ◆ Many patients will notice a small amount of blood at the anus and 3with bowel movements for a day or two. If brisk or prolonged bleeding occurs (especially with passage of clots) please let your doctor know. This rarely may require packing or placement of a stitch.
- ◆ Some patients will notice some blood in the urine. This can easily be dealt with by increasing liquid intake, and it should resolve quickly. If you pass thick blood or clots, or are unable to pass urine at all, please call our office. Very infrequently a catheter may be placed temporarily to allow passage of urine.
- ◆ A brown or red discoloration of the semen may be observed for several weeks. This is common and not significant.
- ◆ Infection can occur in the prostate following biopsy. Symptoms may include increasing pain, difficulty with urine passage or bowel movements, fever, chills, nausea, or vomiting. If any of the above occurs, please let the office know immediately. Infection is rare with the current use of preventative antibiotics and the small, automated biopsy needle, and the need for intravenous antibiotics, administered in the hospital is very uncommon.

RESULTS:

The biopsy results are often available in two to four days. Please make arrangements with your doctor to review the results, either in the office or over the phone.