

Research finds surgery outperforms drug therapy in treatment of benign prostatic hyperplasia

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A 17-year-long community study looking at symptoms of enlarged prostate in over 2,000 men age 40 to 79 years suggests that surgery for benign prostatic hyperplasia (BPH) offers more relief from incontinence and obstruction symptoms than treatment from drug-based therapy, according to a new study by researchers at Mayo Clinic. The researchers presented their results today at the annual meeting of the American Urological Association.

Overall, results show:

- [Urinary incontinence](#) was a common condition, coexisting with BPH/lower [urinary tract symptoms](#).
- In the community setting, patients with the highest symptom scores were most likely to receive surgical intervention.
- Symptoms stabilized and did not get worse after treatment of all kinds.
- Patients who underwent transurethral resection of the prostate (TURP) had the greatest decrease in both symptoms and incontinence compared to other treatment groups. Pre-TURP the incontinence rate was 64.5 percent and post-TURP it was 41.9

percent.

The findings provide large-sample, long-term data comparing the effectiveness of medical versus surgical treatments in a large, general population, as compared to small, select clinical populations of men.

"Our data fills a gap in the research record that can be used by physicians and patients to evaluate management options," says Amy Krambeck, M.D., Mayo Clinic urologist and lead study investigator.

"Because it's a large community-based study of more than 2,100 men, it includes the entire broad range of male health. This suggests the results are stronger in terms of being generalized and applied to other men."

BPH and lower urinary tract symptoms, such as frequent urge to urinate or leakage, are common.

By age 60, an estimated 50 percent of all men suffer from enlarged prostate symptoms; by age 90, about 80 percent do. Multiple treatments exist. But data comparing drug therapy to surgery are lacking, making clinical decisions vulnerable to subjective factors.

From 1990 through 2007, the study enrolled 2,184 healthy men, age 40-79, living in Olmsted County, Minn., All participants completed surveys every other year about their urinary symptoms and the treatments they received. From this information, the investigators examined urinary problems and incontinence before and after different types of treatment.

Results showed that of the 2,184 men:

- 1,574 (72%) received no treatment for BPH symptoms.
- 307 (14%) took alpha adrenergic receptor blockers (α -ARs).

- 195 (9%) took the medication 5-alpha-reductase inhibitors (ARIs).
- 23 (1%) received surgical laser vaporization.
- 85 (4%) received surgical transurethral resection of the prostate (TURP).

Comments Dr. Krambeck: "After intervention, the greatest improvement in symptom score was seen in the TURP group, followed by laser vaporization, then the drugs, 5 alpha reductase inhibitors and alpha adrenergic receptor blockers. Only the surgical TURP group reported a decrease in incontinence -- pre-TURP the incontinence rate was 64.5 percent and post-TURP it was 41.9 percent." This reduction in incontinence rates is significant when compared to the increase in reported incontinence in the patients receiving both forms of medical therapy and no change in symptoms for patients receiving laser vaporization.

Provided by Mayo Clinic

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