

# New catheter-less technique may ease the pain and discomfort of prostate cancer recovery

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To ease the pain of recovery following prostate cancer surgery, physician-scientists have developed an innovative and patient-friendly approach that eliminates the use of a penile urinary catheter. The new patentable technique, used in conjunction with robotic prostatectomy -- the surgical removal of the prostate -- eliminates the pain and discomfort associated with the standard catheter.

"Robotic surgery offers better cosmetic benefits, reduced pain, early continence, a high rate of sexual potency, and minimal blood loss, all without sacrificing the success of cancer elimination," explains lead researcher Dr. Ashutosh K. Tewari, director of robotic prostatectomy and outcomes research at NewYork-Presbyterian/Weill Cornell and the Ronald P. Lynch Associate Professor of Urologic Oncology at Weill Cornell Medical College.

"But, now, the new technique we are studying may further enhance the comfort for our patients," says Dr. Tewari.

The new study is published today in the *British Journal of Urology International*.

The research team studied 50 patients -- 30 implanted with the custom designed device, and 20 who received the standard penile catheter. The two groups were comparable in age, prostate specific antigen (PSA)

level, body mass index (BMI), the grade and stage of the cancer, length of surgery, blood loss, and several other operative measures. The results were positive.

The control group experienced penile pain and discomfort nine times greater than the experimental group, and seven times greater discomfort while walking and sleeping. There were no serious side effects observed in either group.

"The results are very exciting because through this new technology, we are able to continually improve on the robotic surgical option that has already given men a high rate of continence and sexual function," says Dr. Tewari.

Because robotic surgery has vastly improved recovery -- allowing patients to return home within one day of the procedure -- patients will often focus on the penile and urinary discomfort caused by the catheter's implantation and following removal. The new approach, developed by Dr. Tewari and his team, avoids implantation of an irritating catheter through the penis' urethra -- the tube connected to the urinary bladder that allows for the passage of urine and seminal fluid to the outside of the body.

The new approach re-routes urine directly from the bladder by way of a narrow tube that exits through a small needle puncture below the gut, and also serves to support the internal urinary structures as the patient heals.

Past studies examining the advantages of avoiding catheter use have indicated that they impart less risk for bacterial infection, reduce discomfort, and reduce the need for re-catheterization.

"In the future, the new technique might also be used effectively for non-

robotic prostate removal," says Dr. Tewari.

However, Dr. Tewari says that not all patients may be a candidates for this new option based on their body mass and amount of abdominal fat, prostate size, or those who are taking blood thinning drugs or who have a higher likelihood of bleeding.

These new findings build upon the groundbreaking work of Dr. Tewari, and his collaborators in the Department of Urology at NewYork-Presbyterian/Weill Cornell, to better improve the lifestyles of patients following prostate removal, such as the reconstruction and sparing of nerves and muscles in order to preserve urinary continence and sexual function. Dr. Tewari is a leader in the field of robotic prostate surgery and has been involved with over 2,500 surgeries to date.

Source: New York- Presbyterian Hospital

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