

# Aquablation procedure safe for BPH, with durable efficacy

May 31 2023, by Elana Gotkine

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For men with large prostates, the Aquablation procedure is safe, with

lasting efficacy, according to a study published online April 28 in *The Journal of Urology*.

Naeem Bhojani, M.D., from the University of Montreal, and colleagues reported five-year safety and efficacy outcomes of the Aquablation procedure for treatment of symptomatic benign prostatic hyperplasia and large-volume [prostate](#) glands. Data were included for 101 men with moderate-to-severe benign prostatic hyperplasia symptoms and prostate volumes between 80 and 150 mL (mean volume at baseline, 107 mL), who underwent a robotic-assisted Aquablation procedure.

The researchers found that the study successfully met its safety and efficacy performance goal at three months, which was based on transurethral resection of the prostate outcomes typically done in smaller prostates. A significant improvement was seen in patient symptoms, with a change of 15.9 in the International Prostate Symptom Score (from 22.6 at baseline to 6.8 at five years).

Improvement was also demonstrated in the mean maximum urinary flow rate, from 8.6 to 17.1 mL/s at baseline and five years, respectively (change, 9.2 mL/s). No difference was seen in efficacy outcomes through five years in a prespecified subgroup analysis using a baseline prostate volume cutoff of 100 mL. At five years, freedom from a secondary benign prostatic hyperplasia procedure was 96.3 percent.

"With real-time ultrasound guidance and robotic execution, Aquablation has the potential to treat prostates of nearly any size," the authors write. "The five-year [data](#) validate the durability of Aquablation."

Several authors disclosed ties to PROCEPT BioRobotics, which funded the [clinical study](#).

**More information:** Naeem Bhojani et al, Aquablation Therapy in

Large Prostates (80-150 mL) for Lower Urinary Tract Symptoms Due to Benign Prostatic Hyperplasia: Final WATER II 5-Year Clinical Trial Results, *Journal of Urology* (2023). [DOI: 10.1097/JU.0000000000003483](https://doi.org/10.1097/JU.0000000000003483)

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