

Retrospective Analysis of Patients with Lower Urinary Tract Symptoms due to Benign Prostatic Hyperplasia

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Objective: To describe the personal characteristics, symptoms, pattern of referral and management of patients with benign prostate hyperplasia (BPH).

Design: Retrospective study.

Setting: Urology unit, Department of surgery, Salmaniya Medical Complex (SMC), Kingdom of Bahrain.

Method: Six hundred and ninety-six patients were admitted with lower urinary tract symptoms (LUTS) due to BPH during the period from January 1995 till December 2002. The data were collected using previously piloted questionnaire, enquiring about the pattern of referral, presenting symptoms, management and the outcome.

Result: Six hundred ninety-six patients were admitted with LUTS due to BPH. Their age ranged between 37 and 99 years. The majority of the patients 556 (79.8%) were above the age of 60 years.

Abdominal ultrasound was performed in 619 patients (88.9%), digital rectal examination (DRE) was done in 508 patients (72.9%) and prostate specific antigen (PSA) was requested for 383 patients (55%).

Eighty-four patients (12%) received pre-referral pharmacological treatment in the form of α blockers. The majority of these were referred from private clinics.

Five hundred and five patients (72.55%) had transurethral resection of prostate (TURP). Cystoscopy was done for 21 patients (3%).

The histological examination in those who underwent surgery (505 patients) showed, 46.26% (234/505) had pure BPH, 38.8% (196/505) had BPH with other histological findings such as non-specific prostatitis, or associated cystitis and urethritis; and 14.85% (75/505) had prostate cancer.

Conclusion: Health centers have a major role in educating, early diagnosis and proper medical management and timely referral of cases with BPH to the tertiary care centre.

BPH being the disease of aging population and due to the increase in the mean age of the general population, the number of patients with LUTS is likely to increase and must be considered when resources are planned for medical care.

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