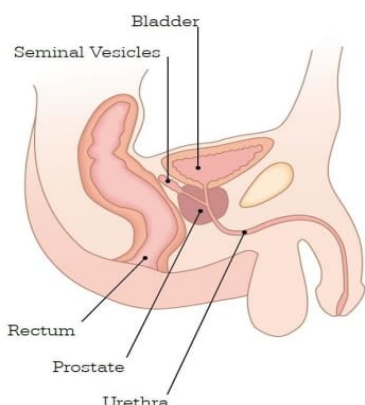


PATIENT INFORMATION

Having a Transperineal Prostate Biopsy

This leaflet should help to answer some of your questions about having a trans-perineal prostate biopsy. If you have any further questions, please speak to a doctor or nurse caring for you.

What is a prostate biopsy?



The prostate gland is only found in men and is about the size of a walnut. It is located just below your bladder, in front of your rectum (back passage) and its function is to produce white fluid that becomes part of your semen.

A prostate biopsy is where small samples of tissue are taken from your prostate gland. The samples are then sent to be examined under a microscope by a specialist.

Due to the special way in which the specimens are prepared for the histopathologist (specialist in examining the cells of the body) the results may take around 2-3 weeks to come back.

What are the risks and side effects of having a transperineal prostate biopsy?

Almost all patients:

- Blood in your urine for up to 10 days
- Blood in your semen which can last up to six weeks. (This poses NO risk to you or your sexual partner. Some people prefer to use condoms, but it is not necessary.)

Between 1 in 2 and 1 in 10 patients (10-50%):

- Bruising in your perineal area
- Discomfort in your prostate caused by bruising from the biopsies

Up to 1 in 20 patients (5%):

- Temporary problems with erections caused by bruising from the biopsies
- Inability to pass urine (acute retention of urine) and needing a catheter in the bladder

Up to 1 in 50 patients (2%):

- Blood in your urine preventing you from passing urine (clot retention)

Between 1 in 10 patients and 1 in 50 patients (1-2%):

- Failure to detect significant cancer in your prostate
- Need for repeat procedure if biopsies are inconclusive or your PSA level rises further

Up to 1 in 100 patients (1%):

- Blood in your urine requiring emergency admission for treatment
- Infection in your urine requiring antibiotics
- Septicaemia (blood infection) requiring emergency admission for treatment
- Local anaesthetic toxicity

Why do I need this procedure?

This procedure is performed primarily to check for possible prostate cancer. There are a number of reasons why you might have been advised to have a prostate biopsy:

- Your doctor/nurse specialist may have found a lump or abnormality during a digital rectal examination (DRE). A DRE is where a doctor/nurse specialist feels your prostate gland through your rectum (back passage) with his/her index finger.
- A blood test showing a high level of prostate-specific antigen (PSA). PSA is a protein that is released into your blood from your prostate gland and a high level of PSA may indicate cancer.
- A previous biopsy result was returned with no evidence of cancer but your PSA blood test is still suspicious.
- An MRI Scan of your prostate gland which detected an area in the gland that is suspicious for cancer.
- You may have a known diagnosis of prostate cancer that has not required treatment and your doctor/nurse specialist might want further information to plan for possible treatments or observation.

The biopsy can find out whether any of your prostate cells have become cancerous or, if you have pre-existing cancer, whether the cancer has changed. It can diagnose other conditions such as benign prostatic hyperplasia (enlargement of the prostate), prostatitis (inflammation of the prostate, usually caused by a bacterial infection) or prostatic intraepithelial neoplasia (PIN), which is a change in the cell type but not cancer.

What are the alternatives to this procedure?

- **Transperineal biopsies under a general anaesthetic** (where you are unconscious) or **using a spinal block** (where you are awake).
- **Further monitoring** of your PSA or MRI. An MRI scan may detect early high-grade cancers, but can fail to detect low-grade cancer.

The most suitable option will have been discussed with you at your consultation.

What happens before the procedure?

Please inform the team if you have any drug allergies or sensitivities. Please let us know if you are taking any blood-thinning medication (e.g. clopidogrel, warfarin, dabigatran, rivaroxaban, apixaban). We will usually have asked you to hold off these prior to the procedure. You can continue to take low dose (75mg) aspirin. You will be advised what to do.

Please confirm with your treatment team when you should restart your anticoagulants before you leave the hospital after the biopsy.

Please telephone the Urology Department if you are unsure which medications you should stop taking. Tel: 01803 655009 option 5

Coming into hospital and what to expect when I arrive

Your appointment letter will contain full details. As this is a local anaesthetic procedure you can eat and drink normally before coming to the hospital. Make sure that if you are on blood pressure medication, you take it as you would do normally.

When you arrive, you will be given a specimen pot and asked for a urine sample. This is to check that you do not have a urine infection. If you do, this may mean we cannot go ahead with the biopsy until it has been treated. A nurse will go through your medications with you and ask you some questions. You will be asked to change into a hospital gown and remove your lower clothes.

What should I expect during the biopsy?

The procedure will be undertaken by either a doctor, surgical care practitioner or nurse who has been trained to do this.

You will be asked to lie on your back on a specially modified table and your legs will be placed in supportive stirrups. To get you into the correct position to take the biopsies, the doctor/surgical care practitioner/nurse will apply some tape to elevate your scrotum out of the way. If you find the position too uncomfortable please tell the doctor/surgical care practitioner/nurse, as you will be in this position for about 20 minutes.

The doctor/surgical care practitioner/nurse will feel your prostate by placing a finger in your back passage. (This is called a digital rectal examination, or DRE.)

The doctor/surgical care practitioner/nurse will use an antiseptic solution to clean the skin in the area through which the biopsies will be taken (between the scrotum and anus).

They will then insert an ultrasound probe, covered in lubricating jelly, into your back passage and this will stay in place throughout the procedure. The probe allows the person performing the procedure to see an image of your prostate, which they will use to guide the collection of the biopsies. Inserting the probe may be uncomfortable but should not hurt.

You will then be given an injection of local anaesthetic to make the area go numb. This will sting for the first few seconds but should soon go numb. Once the local anaesthetic is complete, it will then be given a few minutes to take full effect. We will check the area is numb before we proceed.

The prostate biopsies are taken with a device that contains a spring-loaded needle. The needle is inserted into the prostate gland and removes a tissue sample very quickly. You will hear the click of the 'gun' as it is used to take the biopsy. Normally, between 12 and 24 biopsies are taken. You may feel a brief, sharp pain as the biopsy needle is inserted into the prostate gland. If this continues you should let us know, as we can give you more anaesthetic.

How long does the procedure take?

The procedure itself will take around 20 minutes. However, you are likely to be on the hospital site for approximately two to three hours.

What should I expect after the biopsy?

After the biopsy you can get up slowly and get dressed. It is important to take this slowly, as you may feel quite lightheaded after the procedure. If you feel faint or unwell after leaving the biopsy room, please tell the nurse.

As you have had a local anaesthetic you can leave as soon you are passing urine normally. You will be required to have someone drive you home after the procedure and asked to rest at home after this. We recommend that you have a drink and something to eat before you leave the hospital.

We will provide you with a copy of your discharge letter, which also gets sent to your GP.

When you are at home

You may have mild discomfort in the biopsy area for one or two days after the biopsy. You may also notice some blood in your urine for a few days. Your semen may be discoloured (pink or brown) for up to six weeks, and occasionally longer, after the biopsy. This is nothing to worry about. You should drink plenty of non-alcoholic fluids while you have blood in your urine.

Please seek medical advice in your nearest Accident & Emergency (A&E)

Department immediately:

- You start to experience lots of pain in your tummy or when passing urine
- You have high temperature and/or shivering and shaking
- You feel nauseous and/or vomit
- You do not pass urine for more than six hours, or you start to feel uncomfortable/full and have difficulty in passing urine.
- You start passing large clots of blood

Do not wait for an appointment with your GP if any of the above happens.

Biopsy Results

You will be contacted with the biopsy results after they have been reviewed by our multidisciplinary team. This can take around 2-3 weeks. Please contact our secretaries if you haven't heard from us after 3 weeks.

Tel: 01803 654806/654846/655282/656579

Further Information

Prostate Cancer UK

Telephone: 0800 074 8383

www.prostatecanceruk.org

Macmillan Cancer Support

Freephone: 0808 808 0000 (7 days a week, 8am – 8pm)

www.macmillan.org.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

Telephone: 111

NHS Choices

Provides online information and guidance on all aspects of health and healthcare to help you make choices about your health.

www.nhs.uk

Contact us

If you have any questions about this procedure or your results, please contact one of our **Urology Specialist Nurses** on **01803 655009 option 5** (Monday to Friday, 8am to 5pm).

If you, or the individual you are caring for, need support reading this leaflet please ask a member of staff for advice.

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.