Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Urol 026 Trans-perineal prostate biopsy

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Trans-perineal Prostate Biopsy

Patient Information

The Richmond Urology Unit, Leigh Infirmary

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Introduction

You have been given this leaflet as you have been booked to have a trans-perineal ultrasound guided prostate biopsy. This has been arranged after you had some specific tests performed that show that you need to have a prostate biopsy. The biopsy of your prostate is to confirm or exclude prostate cancer. This will be performed in the outpatient department under local anaesthetic (you will be awake) at the Richmond Urology Unit at Leigh infirmary.

Please read this leaflet before you come for your appointment. If you have any questions prior to your appointment, please call the Urology Nurse Specialist: **01942 264491** or Prostate Pathway Navigator: **01942 264973.**

What is a prostate?

Prostate glands are found only in men and are about the size of a walnut. The prostate is positioned just below your bladder and surrounds the tube that your urine passes through.

It sits in front of your rectum and its job is to produce the fluid that mixes with the sperm to make up semen.

Aims - What is a trans-perineal prostate biopsy?

A prostate biopsy involves taking small samples of tissue from the prostate. You may have up to 24 biopsies taken; this will depend on the size of the prostate. These will then be examined under the microscope by a specialist to check whether there is any evidence of prostate cancer.

Benefits:

The main benefit for trans-perineal prostate biopsy is that it has a lower risk of life-threatening infection. The procedure is safer and easier to access different areas of the prostate, which is not well sampled with trans-rectal biopsy. You may have been offered a trans-perineal prostate biopsy because:

- You have a high PSA level (a blood test that can indicate prostate cancer).
- You have a suspicious area seen on your MRI scan which may be easier to reach for a biopsy through the perineum.
- You have a very large prostate.
- You have a known prostate cancer that has not needed treatment, but your doctor wants to check whether the cancer has changed and may require treatment.

Before your biopsy:

The doctor or Urology nurse specialist will explain the reason why you need to have a biopsy and how the biopsy is performed. The risks and benefits will be discussed with you and they will answer any questions or concerns that you may have.

Please ring the department for advice if you are unsure. It is important that you inform the doctor or Urology nurse specialist if you are taking anticoagulants or antiplatelet tablets (blood thinning) including:

- Aspirin (Aspirin 75mg is safe to continue taking).
- warfarin

- clopidogrel
- rivaroxaban
- dipyridamole
- ticagrelor
- prasurgrel
- sinthome
- dabigatran
- apixaban

You will be given advice on when to stop taking your medication, for how long and when to start taking it again.

You must inform your doctor or Urology nurse specialist if you have:

- Any allergies to any medication, including anaesthetics.
- Bleeding problems in the past.
- An artificial heart valve.
- Diabetes.

What will happen on the day of the procedure?

- You **must eat and drink as normal before the procedure.**

- If you have a urine infection or are currently taking antibiotics, please call your Urology nurse specialist on 01942 264956.

- **You will not be able to drive home following the procedure**; please ensure you have someone who can drive you, or to accompany you if travelling home on public transport.

- You can continue to take your normal medication, except for any blood thinning medication that you have been given instruction to stop before you have the biopsy.

- You will be asked to wear a hospital gown.

- The procedure takes approximately 30 minutes, but you may be in the department for up to three hours.

How is the biopsy performed?

You will be asked to lie on the examination couch with your legs supported in stirrups. The doctor/nurse will apply some tape to move your scrotum out of the way. The doctor will then examine the prostate by placing a gloved finger in your back passage. An antiseptic solution (iodine) will be used to clean the skin between your scrotum and rectum, this area is known as the perineum.

This is where the biopsy needle will pass through to take samples from your prostate. The lubricated ultrasound probe is gently inserted into the rectum. The probe will be in the rectum throughout the procedure so your doctor can see your prostate on the ultrasound screen.

An injection of local anaesthetic (lidocaine) will numb the biopsy area. Once the anaesthetic

has had time to work, you may find the procedure uncomfortable but not painful.

The needle is inserted into the prostate and removes samples of tissue very quickly. You may feel a slight discomfort as the biopsy needle is inserted into the prostate. You will hear clicks as the needle takes the biopsy. A few samples will be taken.

What are the risks?

- **Blood in the urine:** This affects almost all the patients and can last for up to ten days. If you pass clots of blood or have persistent bleeding or have heavy bleeding every time you pass urine you must go to Accident and Emergency.

- **Blood in your semen**: Your semen may be discoloured (pink or brown) for up to six weeks, occasionally this can be longer. This affects almost all patients.

- **Bruising around the biopsy site (perineum).**

- **Discomfort in your prostate caused by bruising from the biopsy.**

- **Temporary problems with erections caused by the bruising from the biopsy**: This can affect up to 1 in 20 patients.

- **Difficulty passing urine:** This can affect up to 1 in 20 patients. If you experience difficulty passing urine, you will need to go to your nearest A&E department.

- **Infection in your urine:** This can happen in up to 1 in 100 patients. .If you develop a need to pass urine suddenly or more than usual, if you have a burning sensation when passing urine or it may be cloudy/smelly, then you should seek advice from your GP.

- Infection in your blood: (septicaemia or sepsis). This can happen in fewer than 1 in 200 patients. If you develop a high temperature (above 37.5) or feel unwell with flu-like symptoms it is **important that you should go to your nearest A&E department**

After the biopsy:

- Once we have checked you are feeling well, you can go home.
- We recommend that you rest at home after the biopsy and for the remainder of the day.
- You may have mild discomfort in the biopsy area for one or two days.
- The prostate biopsy samples will be sent for testing.
- Occasionally there is a need for a repeat biopsy, for example if the results are inconclusive; this can happen in about 1 in 50 patients.
- You will receive an appointment, usually one - two weeks after your biopsy. (This could be a telephone call or at the hospital.) please remove bracket information

Contact us:

If you have any questions about this procedure or your results, please contact:

Urology Nurse Specialist:

01942 264491 or 01942 264956 Monday to Friday 8am until 5:30pm.

Or

Prostate Pathway Navigator

01942 264973 Monday to Friday 8am until 4pm.



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