Transurethral Resection of Prostate for the Treatment of Advanced Prostate Cancer and Bladder Outlet Infarction

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ABSTRACT

Objective: To investigate the feasibility of transurethral resection of prostate and the treatment of advanced prostate cancer and bladder outlet infarction, and to analyze the therapeutic effect. Methods: 34 patients with advanced prostate cancer admitted in our hospital from April 2014 to April 2014 were divided into control group (17 cases) with routine endocrine therapy. The study group (17 cases) underwent urethral resection surgery combined with endocrine therapy, through the relevant indicators of prostate treatment were observed to explore the two groups of patients with therapeutic effect. Results: According to the related indexes of prostate treatment, the treatment effect of the study group was significantly better than that of the control group, and the data of the two groups were statistically significant (P < 0.05). Conclusion: The treatment of advanced prostate cancer patients with endocrine combined with transurethral resection of the prostate can effectively treat the symptoms of bladder outlet infarction and improve the quality of life of patients. It has certain value in clinical treatment.

1 Materials and methods
1.1 General information

Randomized from our hospital in April 2014 - April 2016 between the treatments of advanced prostate cancer patients 34 cases, all patients are accompanied by bladder outlet infarction symptoms. 17 patients...
were included in the control group, aged between 62-85 years old, the average age was (76.4 ± 1.3) years; 17 patients were members of the study group, aged between 61 and 83 years, with an average age of (74.6 ± 1.5) years; There was no significant difference between the two groups in general information such as age and condition, and no statistically significant (P> 0.05).

1.2 Treatment

The control group to implement routine endocrine therapy, the study group to implement endocrine combined with transurethral resection of the prostate surgery; postoperative left at the affected area of the three-chamber balloon catheter, 7 days after surgery can pull out the catheter, a week after surgery patients can receive the relevant endocrine therapy, transurethral resection of prostate surgery for the treatment of prostate cancer is not a great effect, mainly for the treatment of patients with bladder outlet infarction problem\textsuperscript{[1-5]}.

1.3 Statistical analysis

The data were analyzed by SPSS18.8 statistical software. The count data were expressed by (%) and tested by \(X^2\). The measurement data were expressed as \(x \pm s\), tested by T value, P <0.05 for comparison between the two groups differences were statistically significant.

2 Results

Surgical study group of patients with bladder outlet infarction has been significantly improved, the patient's residual urine output is also significantly better than the control group, the two groups of patients after comparison can be found, the difference between the data is more obvious, statistically significant ( P <0.05), the specific data are as follows:

Table 1 Two groups of patients before and after treatment of endocrine parameters comparison

<table>
<thead>
<tr>
<th>Group</th>
<th>Number of cases</th>
<th>Prostate symptoms score / score</th>
<th>Residual urine volume / ml</th>
<th>Blood PSA / ngL(^{-1})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control group</td>
<td>17</td>
<td>21.3±1.4</td>
<td>126.8±41.2</td>
<td>5.7±1.3</td>
</tr>
<tr>
<td>Study group</td>
<td>17</td>
<td>17.2±1.5</td>
<td>32.6±13.9</td>
<td>4.8±1.1</td>
</tr>
</tbody>
</table>

Note: Compared with the control group, * P <0.05

Table 2 Comparison of survival rates before and after treatment in two groups [n (%)]

<table>
<thead>
<tr>
<th>Group</th>
<th>Number of cases</th>
<th>Survival rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control group</td>
<td>17</td>
<td>15 (88.23)</td>
</tr>
<tr>
<td>Study group</td>
<td>17</td>
<td>13 (76.47)</td>
</tr>
</tbody>
</table>

| P value      | 0.809           |

Note: Compared with the control group, * P> 0.05
3 Discussion

Early onset of prostate cancer is not obvious, resulting in patients with the best time to delay the treatment of advanced prostate cancer in the country has not yet cure the method, and so more treatment is in a stable condition, so that no longer deteriorated\(^6\)\(^{-}\)\(^{\text{10}}\). After surgery the patients’ the daily urine output was significantly improved, the remaining urine volume was significantly reduced, through the study group and the control group of patients observed that the transurethral resection of the prostate surgery, which will not affect the survival rate of patients, this methods in the early stage of prostate cancer and bladder outlet infarction symptoms of the clinical treatment is relatively effective, with a certain value to promote.

References


[3] Liu Lei, Hou Xiaofei, Ma Lulin, Zhao Lei, Zhang Hongxian. Late Prostate Cancer Bladder Outlet Obstruction in Patients with Palliative Transurethral Resection of the Prostate [J]. Peking University (Medical Sciences), 2015, 04: 597-600.


