

Bladder Outflow Obstruction Caused by Prostatic Calculi

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CASE REPORT

A 76 year-old male presented with worsening symptoms of bladder outflow obstruction, with a progressive history of hesitancy, worsening stream and terminal dribbling. Routine pre-operative investigations did not reveal any significant abnormality except for a plain abdominal X-Ray, that showed considerable prostatic calcification (Figure). At cystoscopy, he was found to have an occlusive looking prostate and the prostatic urethra had a calculus embedded in it.



Prostatic Outflow Obstruction

Michael T. Macfarlane

Prostatic Outflow Obstruction:

Prostatic Obstruction Christopher R. Chapple, 2012-12-06 The human prostate gland is of undoubted importance in reproductive physiology and is one of the commonest causes of clinical urological problems in the male patient Despite the wealth of published lit erature relating to the prostate gland surprisingly little is understood about its neural innervation the influence of pharmacological factors and its precise physiological functions Indeed benign disorders of the prostate gland including benign prostatic hyperplasia bladder neck dyssynergia and inflammatory disorders of the prostate prostatitis prostatodynia although well recognised clinically are as yet poorly characterised and understood It was not until the late 1960s that the subject of urodynamics which for the first time allowed scientific assessment of the function of the lower urinary tract was introduced The first section of this book considers recent advances in our understanding of the innervation of the bladder and prostate gland and the changes in bladder function which accompany prostate medi ated bladder outflow obstruction The clinical consequence of benign prostatic hyperplasia in many patients is bladder outflow obstruction and although the traditional treatment of these conditions is by the use of ablative surgery in recent years a number of new modalities have been investigated and are reviewed in the second section of the book **Prostatic Obstruction** Christopher R. Chapple, 1993-12-17 The human prostate gland is of undoubted importance in reproductive physiology and is one of the commonest causes of clinical urological problems in the male patient Despite the wealth of published lit erature relating to the prostate gland surprisingly little is understood about its neural innervation the influence of pharmacological factors and its precise physiological functions Indeed benign disorders of the prostate gland including benign prostatic hyperplasia bladder neck dyssynergia and inflammatory disorders of the prostate prostatitis prostatodynia although well recognised clinically are as yet poorly characterised and understood It was not until the late 1960s that the subject of urodynamics which for the first time allowed scientific assessment of the function of the lower urinary tract was introduced The first section of this book considers recent advances in our understanding of the innervation of the bladder and prostate gland and the changes in bladder function which accompany prostate medi ated bladder outflow obstruction The clinical consequence of benign prostatic hyperplasia in many patients is bladder outflow obstruction and although the traditional treatment of these conditions is by the use of ablative surgery in recent years a number of new modalities have been investigated and are reviewed in the second section of the book Prostatic Outflow Obstruction P. J. R. Shah, 1994-01-01 Ultrasound guided techniques balloon dilatation of the prostate chronic prostatitis advances in laser therapy etc Benian Prostatic Hyperplasia and Lower Urinary Tract Symptoms in Men Alexander Bachmann, Jean de la Rosette, 2011-11-24 The diagnosis and treatment of Benign Prostate Hyperplasia BPH is considered to be one of the most important topics in urology and afflicts millions of older men world wide This pocketbook will cover the entire background diagnostic process and treatment options available to patients suffering from lower urinary tract sumptoms due to BPH Benign Prostatic

Hyperplasia ,1976 A Comprehensive Guide to the Prostate Bilal Chughtai,2018-02-14 A Comprehensive Guide to the Prostate Eastern and Western Approaches for Management of BPH provides a multidisciplinary approach to BPH and male voiding dysfunction presenting comprehensive guidance on management With an equal focus on traditional complementary and alternative medicine and a look at novel technologies a complete understanding of the BPH disease process is revealed Abstracts and references in every chapter make the connection between research and practice Perfect for researchers and urologists this must have reference provides what is needed to understand BPH and male voiding dysfunction Presents a comprehensive and multidisciplinary approach on BPH and male voiding dysfunction Gives equal focus to traditional complementary and alternative medicine Provides access to videos of procedures using the various treatment modalities covered in the book

Benign Prostatic Hyperplasia United States. Benign Prostatic Hyperplasia Guideline Panel,1994

Benign Prostatic Hypertrophy S. Boyarsky, M. Caine, G.D. Chisholm, P.A. Gammelgaard, P.O. Madsen, M.I. Resnick, H.W. Schoenberg, J.E. Susset, N.R. Zinner, 2012-12-06 For more than 60 years the Californian Family Hinman has exercised a very considerable influence on the development and practice of the highest grade of urology not only in the American West but worldwide The leitmotiv of the Hinman School has been honest and thoughtful consideration of the problems of the genitourinary system gone awry Character is the quintessence of the Hinmans This virtue distinguishes the present volume on benign pros tatic hypertrophy assembled and edited by Frank Hinman Jr I first came under the spell of Frank Hinman Sr via his classic studies of renal counterbalance In brief in an experimental animal the ureter of one kidney was ligated and the subsequent renal hypertrophy of its contrala teral mate was studied quantitatively from anatomic and functional stand points There were two central questions in the Hinman study How does a normal kidney of an experimental animal recognize that its load has been doubled abruptly What is the signal for renal hypertrophy Benign hypertrophy of the prostate is quite different from compensatory hypertrophy of the kidney It is now known that benign prostatic hypertrophy BPH is not a hypertrophy but a benign tumor consisting of a collection of spheroids of micro and macrodimensions In technical terms BPH is an adenofibromyoma Perusal of the present volume will reveal many fascinating facets of BPH of particular interest to urologists and others with an investigative bent of BPH does not occur in children BPH occurs as a medical rarity in mind

Advanced Therapy of Prostate Disease Martin I. Resnick,Ian Murchie Thompson,2000 Advanced Therapy of Prostate Disease from the inital to post surgical psychological concerns this book is a complete guide to every step of prostate disease treatment First it describes the physical exam in detail as well as laboratory and imaging techniques that can confirm a diagnosis Then the pros and cons of treatment methods for every type and variation of prostate cancer and benign conditions are discussed Post surgical treatment including behavioral issues is also outlined **Benign Prostatic Hyperplasia** DIANE Publishing Company,1995-08 Developed to apply to the typical man over age 50 with symptoms of prostatism but with no significant medical morbidities such as diabetes Contains recommendations for patient evaluation symptom assessment and

Textbook of Benign Prostatic Hyperplasia, Second Edition Roger S. Kirby, John D. McConnell, John M. Fitzpatrick, Claus G. Roehrborn, Peter Boyle, 2004-11-29 Completely revised and updated Textbook of Benign Prostatic Hyperplasia Second Edition provides a state of the art overview of the entire field The first edition of this breakthrough book was very well received by urologists around the world and became the standard reference work on the subject of Benign Prostatic Hyperplasia BPH With the constant changes and improvements being made in the rapeutics and treatment in general any book on this important subject needs to be updated frequently The first edition s original sections have been expanded and once again a team of expert editors and contributors ensure that the material presented reflects the latest available information The editorial panel examines all aspects of the disorder from pathophysiology to the latest treatments and clinical trials including MTOPS and PREDICT They explore laser prostatectomy using the holmium laser and a host of other minimally invasive techniques that are seriously challenging standard transurethral resection TUR as the gold standard intervention for this disease Building on the foundation of the first edition this second edition will continue to be the quintessential resource on BPH **Treatment of Lower Urinary Tract Symptoms and Benign Prostatic Hyperplasia:** Current methods, outcomes, and controversies, An Issue of Urologic Clinics of North America, E-Book Kevin T. McVary, Charles Welliver, 2016-08-12 Benign prostatic hyperplasia and the resulting lower urinary tract symptoms is a major part of almost any urologist s clinical practice. Due to the high prevalence of the disease in our aging population new concepts and treatments are constantly entering the marketplace Differences in patient preferences and desired outcomes

require the practicing urologist to understand not only the pathophysiology of the disease but how specific treatments may be better suited for some patients and not others This issue will address the current concepts and treatments available to Bladder Dysfunction in the Adult Alan J. Wein, Karl-Erik Andersson, Marcus J. Drake, Roger R. Dmochowski, 2014-07-15 Bladder Dysfunction in the Adult The Basis for Clinical Management succinctly describes all that the healthcare professional needs to know when treating lower urinary tract symptoms The book describes how to assess and treat every group of patients likely to be affected with bladder problems and the underlying mechanisms responsible Women with stress incontinence men with enlarged prostates people with neurological disease and the elderly are all discussed in particular detail For all professionals treating or learning to treat patients with urinary storage or voiding problems the concise presentation and thorough coverage provides treatment recommendations and clear explanations Authored by recognized experts in their respective fields Bladder Dysfunction in the Adult The Basis for Clinical Management is a comprehensive resource that allows the reader to develop the knowledge understanding and confidence to deal with the many clinical challenges of bladder dysfunction Benign Prostatic Hyperplasia Gerhard Jakse, Christian Bouffioux, Jean de Leval, Rudi A. Janknegt, 2012-12-06 An intense discussion has recently begun regarding current standards in the diagnosis and treatment of benign prosta tic hyperplasia BPH A number of factors have led to this discussion In an increasing proportion of aging men for example BPH causes so called obstructive symptoms that must be relieved by medical or operative means This entails an immense social and economic impact in terms of health costs In addition recent data indicate the most frequently performed operation for BPH transurethral resection of the prostate is associated with a higher risk of death due to cardiac disease than open prostatectomy Furthermore studies using the recently developed technique of uro dynamics to assess bladder outflow obstruction reveal that about 20% 30% of patients treated with transurethral resection or open prostatectomy are actually not obstructed This means that these patients do not receive the most effective therapy Finally various new treatment been developed including medical treat modalities have ment directed at endocrine pathways in the prostatic cells balloon dilatation spirals temporary or permanent stents C nd the application of heat in hyperthermia or thermo therapy The contributions to this volume were selected from a symposium on the diagnosis and treatment of BPH They are intended to provide a comprehensive review of the state of the art in treating BPH Aachen Liege Maastricht September 1992 The Editors Contents Development of Benign Prostatic Hyperplasia 1 J E Altwein and H Baur Bladder Outflow Obstruction Definition Clinical Application and Grading in Benign Prostatic Hyperplasia Non-Motor Symptoms of Parkinson's Disease K. Ray Chaudhuri, Eduardo Tolosa, Anthony Henry Vernon Schapira, W. Poewe, 2014 Patients with Parkinson's disease PD are known to suffer from motor symptoms of the disease but they also experience non motor symptoms NMS that are often present before diagnosis or that inevitably emerge with disease progression The motor symptoms of Parkinson's disease have been extensively researched and effective clinical tools for their assessment and

treatment have been developed and are readily available In contrast researchers have only recently begun to focus on the NMS of Parkinson's Disease which are poorly recognized and inadequately treated by clinicians. The NMS of PD have a significant impact on patient quality of life and mortality and include neuropsychiatric sleep related autonomic gastrointestinal and sensory symptoms. While some NMS can be improved with currently available treatments others may be more refractory and will require research into novel non dopaminergic drug therapies for the future Edited by members of the UK Parkinson's Disease Non Motor Group PD NMG and with contributions from international experts this new edition summarizes the current understanding of NMS symptoms in Parkinson's disease and points the way towards future research

<u>Urology</u> Michael T. Macfarlane,2006 Now in its Fourth Edition this popular House Officer Series volume is a portable quick reference clinical guide to the diagnosis treatment and management of urologic symptoms and diseases It fits into a pocket and provides the essential information that residents and practitioners need when seeing patients on the wards or in the office The book is divided into two sections one on presenting problems and one on diseases

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