

Simple Prostatectomy

WARWIKI

Patient Information · Surgery for a very large enlarged prostate (BPH)

Simple prostatectomy is surgery for a **very large enlarged prostate (BPH)** that is blocking urine flow. The surgeon removes the bulky inner part of the prostate — the part causing the obstruction — through the abdomen, either open or with robotic/keyhole surgery. It is highly effective for big glands.

An Important Difference

“Simple” prostatectomy is **not** the same as “radical” prostatectomy for prostate **cancer**. A radical operation removes the entire prostate to treat cancer. A **simple** prostatectomy removes only the inner enlarged (benign) tissue and leaves the outer shell — it treats **blockage from non-cancer enlargement**.

When It's Used

- For **very large prostates** not well suited to a standard scope procedure (TURP)
- Especially when there are also **bladder stones** or large bladder pouches to address
- Scope-based options for large glands (**HoLEP, Aquablation**) are alternatives — your surgeon will advise which fits you

LEARN THE TERMS

Simple prostatectomy

Removing the inner enlarged prostate for BPH (not for cancer).

Adenoma

The benign inner prostate tissue that is removed.

Radical prostatectomy

A different operation that removes the whole prostate for cancer.

Open vs. robotic

Through one incision, or through small keyhole incisions.

Retrograde ejaculation

Dry orgasm — a common after-effect.

Catheter

A tube draining the bladder for several days afterward.

WILL IT HURT? It's done under general anesthesia, so you feel nothing during it. Because it's an abdominal operation, recovery is **longer than a scope procedure** — expect a few days in hospital (less with robotic surgery), a catheter for several days, and a few weeks of limited activity.

How to Get Ready

- Done under **general anesthesia** — follow fasting and medicine instructions (hold blood thinners as told).
- A **urine test** to rule out infection first.
- Don't smoke; arrange a ride and help at home.

What Happens & After

- 1 You're asleep; antibiotics are given.
- 2 Through an abdominal (open) or robotic/keyhole approach, the bulky inner prostate is removed and the outer shell is left.
- 3 A catheter (and sometimes a drain) is placed; hospital stay is a few days (less with robotic).
- 4 The catheter usually stays **several days to about a week**.

Expect blood-tinged urine early; **avoid heavy lifting and straining** for several weeks.

What to Expect After

- A strong, durable improvement in urine flow.
- **Retrograde ejaculation** (dry orgasm) is common; serious effects on erections or urine control are uncommon.

Call your care team or seek care if you have:

- You **cannot urinate** after the catheter is removed
- **Heavy bleeding or clots**, or a fever/chills
- Worsening belly pain, or wound redness/drainage
- Chest pain, trouble breathing, or a swollen, painful leg (emergency)

THREE THINGS TO REMEMBER

1. Simple prostatectomy removes the bulky inner prostate for very large BPH — it is **not** the cancer operation (which removes the whole prostate).
2. It's very effective for big glands; recovery is longer than scope procedures (HoLEP/Aquablation are scope alternatives).
3. Expect dry ejaculation and a catheter for several days. Call for inability to urinate, heavy bleeding, or fever.