

THE TECHNIQUE OF EVACUATION OF HYPERPLASTIC PROSTATIC TISSUE AFTER THUYAG LASER WITH A NON-MORCELLATING APPROACH

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ABSTRACT

Introduction. Currently, most of the prostate enucleation techniques are based on laser energy. Enucleated tissue usually is removed from the urinary bladder through morcellation. Considering the high risk of morcellation, we tried the modified non-morcellation evacuation technique, which means the resection or vaporization of the enucleated prostate tissue. Material and methods. A retrospective evaluation of 54 patients undergoing ThuVEP from January 2019 to December 2021 was performed at our institution. In twenty-five patients morcellator was used while in other 29 patients the resection of the enucleated tissue on the pedicle was applied. The time of interventions, perioperative and postoperative complications according Clavien-Dindo (2004) classification

were also recorded. Results. There were no cases of gross hematuria, febrile UTI or ureteral orifice injury. Urinary bladder perforation was occurred in 1 case (1.9 %) of all cases. Superficial bladder lesions occurred in 3 patients (5.6 %) of all cases, thus only grade 1 complication were reported, and no specific treatment was required. After same time, no complications were reported in patients who supported resection of enucleated tissue. Comparisons of total operative time and enucleation time showed a slight difference between the two groups. The operating time with the morcellator was on average 75±9 min, without morcellator 87±11 min on average. Conclusion. Our modified technique is a safe and effective procedure for the treatment of BPH, avoiding the potential complications caused by the morcellator.

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