

THE APPLICATION OF LASER ENERGY FOR MINIMALLY INVASIVE TREATMENT FOR PROSTATE LITHIASIS AS A CONSEQUENCE OF NONBACTERIAL PROSTATITIS

A. COLTA², E. PISTRIUGA^{1,2}, V. GHICAVÎI^{1,2}

¹ *Nicolae Testemitanu* State University of Medicine and Pharmacy of the Republic of Moldova

² PMI "Timofei Mosneaga" Republican Clinical Hospital

ABSTRACT

The objectives. To determine the effectiveness of the endourological treatment of IVO caused by the consequence of CNBP (Cronic nonbacterial prostatitis) lithiasis via the Thu:YAG laser energy.

Material and methods. The study was included 54 patients with prostate lithiasis, after-CNBP, and voiding disorders within 3 months, who required endourological surgery. Transurethral incision of the prostate via the Thu:YAG laser was performed at 5 and 7 o'clock position acordly quadrant, followed by the resection of the sclerosis tissues and endoscopic lithotripsy of prostate lithiasis.

Results. Over the 12-month follow-up, IPSS improved significantly from 20.2 ± 2.57 to 8.84 ± 0.58 after the intervention. QoL decreased from 4.53 ± 0.31 to 1.4 ± 0.17 score points, and Q_{max}

increased from 9.14 ± 1.5 ml/s to 19.53 ± 0.16 ml/s.

The mean value of post-void residual decreased (84.8 ± 17.4 ml vs. 16.27 ± 7.6 ml). The following intrasurgery complications were registered: prostate capsule perforation in 3 (5.56%) cases, bladder neck damage in 2 (3.7%) cases, hemorrhage - 1 (1.85%), urethral meatus injury - 1 (1.85%), bladder perforation in the triangle - 2 (3.7%) patients. The after-surgery complications included orchiepididymitis - 1.85%, urethral stricture - 1.85%, and bladder neck sclerosis - 5.56% patients.

Conclusions. Thu:YAG laser incision/resection of the prostate is an effective and safe treatment of IVO caused by CNBP lithiasis, characterized by fast urinary continence recovery, being available to all categories of patients. The advantages are the short-term urethral catheterization and the significant recovery of voiding dysfunction.