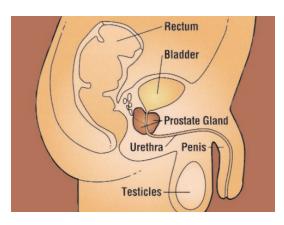
Your Diagnosis

Benign Prostatic Hyperplasia (BPH)



The prostate biopsy your clinician recently obtained from your prostate has been diagnosed as Benign Prostatic Hyperplasia (BPH). BPH is an enlarged prostate. Benign means noncancerous, and hyperplasia means excessive growth of tissue.

Background Information

By age 40 to 45, your prostate gland enlarges normally as benign tumors develop inside. It is not known what causes these growths, but they may be related to hormonal changes that occur with aging.

The prostate gland encompasses the urethra, the tube that carries urine from the bladder to the outside of the body. As these tumors grow they may narrow the urethra, thus causing difficulty in urination.

Symptoms of BPH include:

- Difficulty initiating a urine stream or maintaining urination
- The need to urinate frequently
- · Powerful urges to urinate
- Feeling that the bladder is never completely empty

Over 12 million Americans suffer from the effects of BPH. By age 60, more than half of all American men have microscopic signs of BPH, and by age 70, more that 40% will have enlargement that can be felt on physical examination.

Follow-up Options for BPH

BPH cannot be cured, but its symptoms can be relieved by surgery or drugs in many cases. Please consult with your physician to determine what treatment is most appropriate for your condition and the possible side effects.

Watchful Waiting Men whose symptoms are mild often opt for watchful waiting. This means that they report for regular checkups and have further treatment only if and when the symptoms become too bothersome.

Surgery

There are several types of surgery that are available to relieve the symptoms of BPH.

Transurethral Resection of the Prostate (TURP) This procedure accounts for more than 90% of all BPH surgeries. TURP relieves symptoms quickly, typically doubling the urinary flow within weeks. This procedure involves removing the urethra's lining and bits of excess prostate tissue to expand the urethra.

Transurethral Needle Ablation (TUNA) Uses radio frequency energy to kill excess prostate tissue.

Partial Prostatectomy Portion of the prostate gland is surgically removed to relieve pressure on the urethra.

Drug Therapy

Two major classes of drugs are available, alpha adrenergic blockers and finasteride.

Alpha Adrenergic Relaxes the muscle portion of the prostate and the bladder neck, thus allowing urine to flow more freely.

Finasteride Shrinks the prostate by blocking an enzyme that converts the male hormone testosterone into a more potent growth-stimulating form.

Important Questions to Ask Your Doctor

- For my diagnosis what treatment options do I have?
- · What do you suggest and why?
- · What are the benefits of this option?
- · What are the potential risks or side effects of this option?
- Will I need more tests? For what purpose?
- · What can I do to make my treatment most effective?

Sources for Additional Information

- American Cancer Society: www.cancer.org or 800-227-2345
- National Cancer Institute: www.nci.nih.gov or 800-4-CANCER
- Prostate Cancer InfoLink: www.comed.com/prostate
- The Urology Channel: www.urologychannel.com
- Associated Pathology Medical Group: www.apmglab.com or 800-848-2764



Associated Pathology Medical Group, Inc.

This report is intended for patient education and information only. It does not constitute advice, nor should it be taken to suggest or replace professional medical care from your physician. Your treatment options may vary, depending upon medical history and current condition. Only your physician and you can determine your best option.