Benign Prostatic Hyperplasia (BPH) Diagnosis and Treatment

Accurately diagnosing BPH is extremely important as more serious conditions, such as prostate cancer must be ruled out. Therapy is typically medical; however, in certain instances more invasive therapy (i.e. TURP) may be needed.



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Diagnosis

Digital Rectal Exam
Digital-fingers giving Rectal-rectangle Exam
The examiner palpates the prostate to examine for nodules and asymmetry. The presence of these suggest prostate cancer and not BPH.

Urinalysis to Detect Infection or Blood
Urinal with Urinalysis-cup catching Bacteria and Blood
Urinalysis is performed to rule out infection or presence of blood, which indicate other serious pathology that may require treatment.

Treatment

Alpha-1 Antagonists
Afro (1) Wand Ant-toga
α₁-antagonists can have immediate benefits by relaxing smooth muscle in the bladder neck, prostate capsule and prostatic urethra.

Tamsulosin
Tanning-lotion
Tamsulosin is a commonly used alpha 1-adrenergic antagonist. Unlike terazosin and doxazosin it is less likely to lead to hypotension.

5 Alpha Reductase Inhibitors
(5) Hand Afro Red-duck with Inhibiting-chains
This class of medication blocks the conversion of testosterone to DHT and acts to reduce the size of the prostate gland. It takes longer to exert its therapeutic effect compared with alpha 1-adrenergic antagonists.

Finasteride
Fin-asteroid
Finasteride is a commonly used 5-alpha-reductase inhibitor.

TURP (Transurethral Resection of Prostate)
Turnip with Scalpel
Men who develop serious complications, such as hydronephrosis or renal failure may require transurethral resection of the prostate (TURP), surgery to remove the prostate.

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