

# Have you got a prostate problem?

As men get older, many have trouble with peeing. And the older men get, the more likely this is. For example, it affects over 1 in 4 men aged over 40, rising to 4 in 5 men over 80. The problem is often due to an enlarged prostate gland. The symptoms may be mild and many men put up with them without going to see their doctor. But severe symptoms can be embarrassing and uncomfortable, and may seriously upset daily life.

This issue is for men who have problems with peeing. It explains possible causes, and what can be done to help if the problem's due to an enlarged prostate.

## **Problems with peeing**

It's very common for men to develop problems with peeing as they get older. And the symptoms may get worse with time. Examples of the symptoms include:

- needing to pee often – ‘frequency’
- needing to pee urgently and being unable to wait – ‘urgency’
- difficulty in starting to pee – ‘hesitancy’
- needing to get up during the night to pee – ‘nocturia’
- having a weak flow of urine – ‘poor stream’
- dribbling after you've had a pee
- having to stop and start several times as you pee
- leaking urine when you don't want to – ‘incontinence’
- being unable to empty your bladder completely.

## **Could it be your prostate?**

Many men with such urine problems have an enlarged prostate gland. The prostate produces fluid that forms part of semen. It sits just below the bladder and surrounds the ‘urethra’ – the tube that carries urine out from the bladder.

Commonly, as men get older, their prostate becomes enlarged – due to a condition called ‘benign prostatic hyperplasia’ (BPH). There's nothing you can do to prevent this. But it isn't cancer, and doesn't necessarily cause any problems. However, as the prostate gets bigger, it can eventually squeeze the urethra – this makes it harder for urine to flow out of the bladder. It may even stop the bladder from ever emptying completely. This can leave a stagnant pool of urine which makes urine infections more likely.

Cancer is another possible cause of the prostate becoming enlarged and causing problems with peeing. Such cancer is common in men as they get older. But crucially, it often doesn't cause problems or shorten life.

## **Overactive Bladder**

To pass urine, the muscle that lines the bladder tenses up to help squeeze urine out. But, in some people, this muscle squeezes without warning when they don't want it to. This problem is called an ‘overactive bladder’ or ‘detrusor instability’. It causes problems such as suddenly needing to pee, or passing urine accidentally if you don't get to the toilet in time. Some men have an overactive bladder and an enlarged prostate.

## **What else could it be?**

Another common cause of problems with peeing is an ‘overactive bladder’ – see end paragraph, for more on this. People with an overactive bladder need to pee urgently, very often, or are sometimes so desperate to pee that they accidentally pass urine before they can get to a toilet.

For some other men, their main or only symptom is having to get up several times each night to pee. The exact cause of this can vary from man to man and may take some working out.

Possible other causes of problems with peeing include urine infections, certain medicines, diabetes, constipation, and other medical problems affecting, for example, the bladder or kidneys.

## **Getting checked out**

Many men put off going to see their doctor about problems with peeing. This might be because they’re embarrassed or are worried they have prostate cancer. Or they might just think their symptoms are due to ‘getting old’ and can’t be helped. But if you have such problems and they’re bothering you, it’s worth letting your GP know.

## **Seeing your doctor**

Your GP will try to decide what’s causing your symptoms. To do this, they’ll need to know what problems you’ve been having and how bad they are. It will help your doctor if you keep an accurate record for around a week showing when and what you drink, when you have to pee and how much urine you pass. It’s vital to tell your doctor how long you’ve had problems with peeing and whether they’re getting worse. It’s important you also mention if you ever have problems such as blood in your urine or pain when you pee.

Your doctor will need to feel your tummy to see if your bladder is obviously swollen. To check whether your prostate feels abnormal, they’ll probably also need to do an internal examination of your back passage. Some men are embarrassed about having this done. But it provides crucial information and is quick and usually painless.

## **Tests**

You’ll probably need to give urine and blood samples that will be tested for problems such as infection, kidney problems or diabetes.

Your doctor might also suggest you have a ‘PSA test’ to help look for prostate cancer. The paragraph at the end explains more about this test. But there’s a lot of debate about who should have this test and when. One reason for this is that the result doesn’t give a ‘yes’ or ‘no’ answer to say whether a man has cancer – it’s just a rough guide to the likelihood of this. And a high result may lead to unnecessary worry, tests and treatment. So it’s worth carefully discussing the pros and cons of having this test with your doctor beforehand.

## **Prostate cancer and the PSA test**

Although prostate cancer is very common in older men, it often doesn’t cause any problems. In fact, many men wouldn’t know they had prostate cancer unless they were tested for it.

One test used to help assess the chance that a man has got prostate cancer is the PSA test. It's a blood test that measures the level of prostate specific antigen – a protein made by the prostate.

A high PSA level may suggest prostate cancer. But it can also just suggest certain prostate conditions that are not cancer. What's more, a normal PSA test doesn't totally rule out prostate cancer.

### **What next?**

Depending on your symptoms and your test results, your GP may refer you to a specialist doctor or nurse for further advice, tests or treatment. These might include, for example, an ultrasound scan or tests to measure your flow of urine.

Whatever the cause of your symptoms, your doctor or nurse can help you decide the best course of action. Whether or not you need treatment will depend on how much your symptoms bother you. If they aren't troubling you too much, it may be best to wait and see whether they get worse. The following sections focus on what might help if your symptoms are mainly due to an enlarged prostate with no sign of cancer.

### **Helping yourself**

The paragraph at the end suggests places where you can find out more about prostate problems or other problems with peeing.

Whatever your symptoms, there are a few things that you can try yourself that might help:

- **not drinking too much liquid.** If it's clear you're drinking more fluid than you need to, cutting down should help reduce how much urine you produce. Hopefully, this will reduce how often you have to pee. In particular, it may be worth drinking less before bed or a long journey. However, you need to be careful because drinking too little can cause serious problems. So, if you're in any doubt about how much fluid you should drink, ask your GP or nurse.
- **Cutting down on caffeine and alcohol.** Drinks containing caffeine or alcohol make you produce more urine than do drinks such as water. So they're worth avoiding before bed or a long journey. There's caffeine in drinks such as coffee, tea and certain fizzy drinks.
- **Peeing twice when you go to the toilet.** This involves peeing as much as you can, and then trying again after a few moments. This may help ensure you've emptied your bladder completely.
- **A technique that might reduce dribbling.** After peeing, you place your fingers behind your scrotum and then gently massage the base of your penis forwards and upwards to help push out remaining urine that's in your urethra.

### **Herbal remedies**

Tests with patients suggest that the herbal remedy *Serenoa repens* (saw palmetto) may help reduce symptoms in some men with an enlarged prostate. However, it's not clear how it works. And its safety hasn't been tested in the long term, so anyone thinking about trying it needs to bear this in mind.

## **What else?**

### **Medicines**

If the suggestions in the previous section don't help you enough and your symptoms are still troublesome, you may want to try medicines. Your doctor, nurse or pharmacist can tell you more about these and their side-effects. Two types in particular may help. They don't cure an enlarged prostate, but might help relieve the symptoms while you take them:

- alpha-blockers (alfuzosin, doxazosin, indoramin, prazosin, tamsulosin or terazosin). These are probably the best medicines to try first. They can help to reduce symptoms by relaxing muscles in the prostate and bladder.
- 5-alpha reductase inhibitors (finasteride or dutasteride). These can help make the prostate smaller and improve the flow of urine. It may be worth trying one if an alpha-blocker doesn't work or doesn't suit you, or if your prostate is found to be particularly large. Such treatment can take up to 6 months to work fully.

### **A prostate operation?**

If you're very troubled by your symptoms and medicines haven't worked for you, an operation might be an option. This usually involves operating through the urethra to remove or destroy part or all of the prostate. If this works, it should cure the problem. Your doctor will be able to discuss the pros and cons of such an operation with you.

### **Find out more**

Your doctor or nurse will be able to give you more information and advice about things covered in this leaflet.

The following may also be useful:

NHS Direct

[www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)

Tel. 0845 46 47

NHS Prostate Cancer Risk Management

[www.cancerscreening.nhs.uk/prostate/](http://www.cancerscreening.nhs.uk/prostate/)

Prostate Research Campaign UK

[www.prostate-research.org.uk](http://www.prostate-research.org.uk)

Tel. 020 8582 0246

The Continence Foundation

[www.continence-foundation.org.uk](http://www.continence-foundation.org.uk)

Tel. 0845 345 0165