

Having a transperineal biopsy of the prostate

Information for patients from Urology

This leaflet tells you about the above procedure. It explains what it involves and the possible risks. It is not meant to replace informed discussion between you and your doctor but can act as a starting point for such a discussion. Please feel free to discuss the examination with your referring doctor or the person carrying out your examination.

What is the prostate?

The prostate is a small gland associated with the male reproductive process. It is found at the base of your bladder. It tends to get larger with age and can partly block the flow of urine.

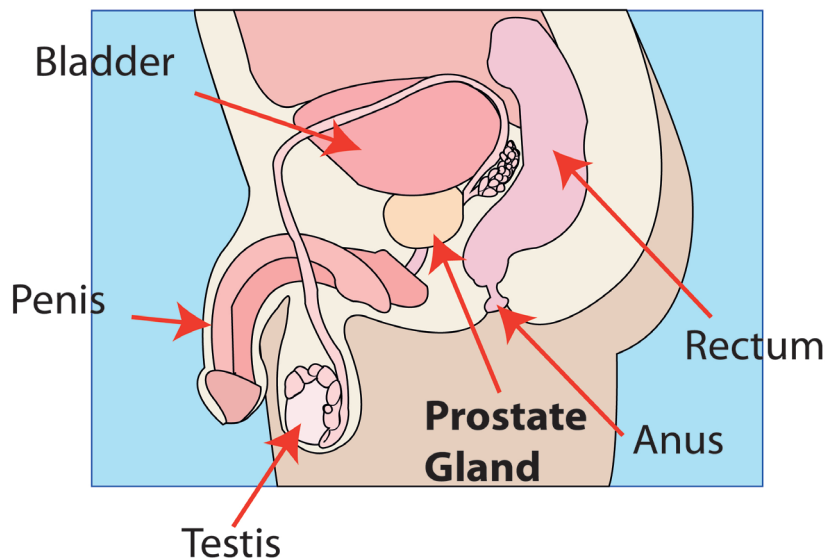


Diagram showing the position of the prostate



Why have I been referred for a transperineal ultrasound scan and prostate biopsy?

There are a number of reasons why you might have been advised to have a prostate biopsy.

- Your doctor/nurse specialist may have found a lump or abnormality during a digital rectal examination (DRE). A DRE is where a doctor feels your prostate gland through your rectum (back passage) with their index finger.
- You may have had a blood test showing a high level of prostate-specific antigen (PSA). PSA is a protein that is released into your blood from your prostate gland. High levels of PSA in your blood may mean there is a problem with your prostate. Further tests are needed to determine what these are.
- You may have had previous biopsy results that came back with no evidence of cancer but your PSA blood test is still suspicious.
- You may have a known diagnosis of prostate cancer that has not need treatment and your doctor/nurse specialist might want further information to plan for possible treatments or observation.

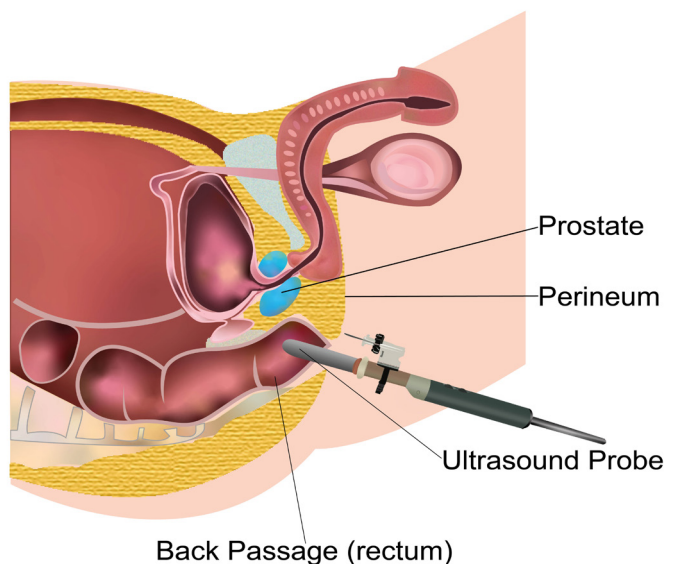
The biopsy can find out whether any of your prostate cells have become cancerous or, if you have pre-existing cancer, whether the cancer has changed. It can also diagnose other conditions such as benign prostatic hyperplasia (enlargement of the prostate), prostatitis (inflammation of the prostate, usually caused by a bacterial infection), or prostatic intraepithelial neoplasia (PIN), which is a change in the cell type but not cancer.

How is the biopsy done?

You will normally have had a transrectal biopsy before your doctor/nurse specialist suggests using the transperineal technique. However, due to the Coronavirus pandemic, we have only been taking biopsies using the transperineal technique.

For more information on having a transrectal biopsy, ask a member of staff for a copy of the Trust's **Having a transrectal ultrasound scan and prostate biopsy** leaflet or download a copy from www.ekhuft.nhs.uk/urology-leaflets/

A transperineal template biopsy is used to gain further information about your prostate over and above the information provided by a transrectal biopsy. Using an ultrasound probe in your back passage, we take samples of the prostate from a different angle through the perineum (the skin between your scrotum and back passage the perineum).



Will the procedure hurt?

You may feel discomfort when the probe is inserted, which is a little wider than your finger. The biopsies are performed under local anaesthetic, so there will be pain and discomfort while the local anaesthetic is being given, like when visiting the dentist, however, after this you should feel no pain.

Are there alternatives?

If alternatives are available to you, depending on your PSA, MRI results, and following your consultation, these will be shared and discussed with you on the day of your procedure.

What happens if I choose not to have the procedure?

We recommend you have this procedure as it is the only one that will clearly find cancer, offering the diagnosis needed before you receive further necessary treatment.

Will I need to stay in hospital overnight?

No, you do not need to stay in hospital overnight after having an ultrasound scan and prostate biopsy. However, we ask that you return to Kent and Canterbury Hospital Urgent Treatment Centre (if you are able to) or your local Accident and Emergency (A&E) Department should any complications arise following your procedure.

Are there any risks or complications?

- **Small amounts of blood from the rectum and in the urine** may occur for 24 to 48 hours, sometimes longer; this is normal. If it becomes heavy or continues, please go to the Kent and Canterbury Urgent Treatment Centre or your local A&E department.

Rarely, **heavy bleeding** happens at the time of your biopsy, in which case you will be kept in the department until it settles.

- **Infection**, while unusual, is the most common complication, and usually happens 24 to 48 hours after your biopsy. Occasionally the infection can be bad enough to need hospital treatment with intravenous (IV) antibiotics.
- **Difficulty passing urine.** It is possible that the biopsy may cause an internal bruise that causes you to have difficulty passing urine. This can happen in two in every 100 cases and is more likely to happen in men who had difficulty passing urine before having their biopsy. Should you have difficulty passing urine, you may need a temporary catheter and you will need to go to Kent and Canterbury Hospital Urgent Treatment Centre or your nearest A&E department. A catheter is a hollow, flexible tube that drains urine from your bladder.

Despite these risks, your specialist will have decided that you should have this examination. Remember that the risks from missing a serious disorder by not having the procedure are considered to be much greater.

Where will the procedure take place?

Your procedure will take place in a room in the Outpatients Department.

Please note that due to the nature of the examination we are unable to accommodate unaccompanied children within the department and due to social distancing measures are not allowing visitors to come with you into the hospital.

How do I prepare for a transperineal ultrasound scan and prostate biopsy?

Normally no preparation is needed. However, patients taking anticoagulants (blood thinning medication such as aspirin, clopidogrel, ticagrelor, prasugrel, rivaroxaban, dabigatran, apixiban, or warfarin) and dipyridamole may be asked to stop taking them before their biopsy. Please contact Urology on 01227 86 43 83 if you are not sure about when to stop taking your anticoagulants.

Before you have your biopsy, you should let your doctor or specialist nurse know if you;

- are taking anticoagulant medication
- are allergic to any antibiotics
- have or have ever had bleeding problems
- have an artificial heart valve.

You should continue to take all of your medications as normal, unless you have been told otherwise by the doctor who organised your biopsy

What will happen when I arrive at hospital?

On arrival at the hospital please report to the reception desk in the Outpatients or Urology Department (see your appointment letter for details). You will be seen by the specialist who will explain your procedure, before asking you to sign a consent form. Please use this time to ask any questions and raise any concerns you may have. Remember you can withdraw your consent for treatment at any time.

What happens during the biopsy?

You will be asked to lie on a table and your legs will be placed in supportive stirrups. Your doctor/nurse specialist will examine your prostate with a finger in your back passage and use a special gel to relax your anus muscle. They will then tape your scrotum out of the way and lift your legs so that your hips are bent as far as possible.

The doctor/nurse specialist will then use an antiseptic solution to clean the skin between your scrotum and your anus, which is the area through which the biopsies are taken.

You will then be given an injection of the local anaesthetic, which will numb the treatment area so that you do not feel any pain during the procedure. The injection will sting for a few seconds (a bit like having an injection at the dentist). Once the anaesthetic has had time to work, although you may find the procedure uncomfortable, you should not feel pain.

The probe will be in your rectum throughout the procedure so that your doctor/nurse specialist can see your prostate. A very fine needle is then passed through the numb skin of your perineum, below your scrotum, taking biopsies of your prostate.

The biopsy is taken with a biopsy needle. The needle is inserted into your prostate gland and removes a tissue sample very quickly. You will hear the click of the 'gun' as it takes the biopsy. Normally, between 12 and 24 biopsies are taken.

If you are unable to tolerate the procedure under local anaesthetic, you will need to come back to hospital to undergo the procedure under a general anaesthetic; you will be told when to stop eating and drinking before the procedure. The anaesthetic will be given through a small needle inserted into the back of your hand. This will make you sleep for the whole procedure, so you will not feel any pain or discomfort. You will wake up in the recovery room and your surgeon will see you before you are discharged from hospital.

Will I need a prescription of antibiotics before receiving my prostate biopsy?

No, if you are having a transperineal biopsy of your prostate you do not need prescribed antibiotics, however, advice will be given to you on the day of your procedure by your doctor or specialist nurse if needed.

How long will it take?

The complete consultation takes about 45 minutes, but the biopsy procedure between 15 to 30 minutes.

If you have received a general anaesthetic, following your biopsy you will be taken to the recovery room. If you have had a local anaesthetic, you can leave as soon you are passing urine normally. You will be asked to rest for about four hours at home after this.

What do I need to know before I go home?

- If you have had a general anaesthetic, you will need someone to help you home, as your muscles may ache, and you may feel woozy because of the anaesthetic.
- General anaesthetic takes 24 to 48 hours to wear off, so please rest for this period of time.
- Before you leave hospital, you may be given antibiotics to take at home to prevent infection. Your nurse will explain why you have been given these and how long you need to take them for.

Before you leave hospital, we will tell you how your procedure went, and you should:

- make sure you understand what has been done
- ask your surgeon if everything went as planned
- let the staff know if you have any discomfort
- ask what you can (and cannot) do at home
- make sure you know what happens next; and
- ask when you can return to normal activities.

Can I drive after my procedure?

You cannot drive for 24 hours after your procedure or until pain allows and you can carry out an emergency stop pain free. Please arrange for someone to take you home from hospital after your procedure.

When will I receive the results of my biopsy?

The biopsies are examined by a pathologist and you will receive a follow-up appointment within two weeks of your procedure to discuss your results with your urologist or cancer nurse specialist.

How will I feel afterwards?

- You may have mild discomfort in the biopsy area for one or two days after your biopsy.
- You may also notice some blood in your urine for a few days.
- Your semen may be discoloured (pink or brown) for up to six weeks, and occasionally longer, after your biopsy. This is nothing for you or your partner to worry about.
- You should have plenty of non-alcoholic drinks while you have blood in your urine.

What if I have any questions or concerns once I return home?

Please go to your Kent and Canterbury Hospital Urgent Treatment Centre or your local A&E department if you experience any of the following.

- your pain gets worse
- you have a temperature higher than 100.4°F (38°C)
- you do not pass urine for eight hours
- you start to pass large clots of blood; and/or
- you have heavy and non-stop bleeding.

If you need to visit your local A&E, please ask them to contact the on call Urology Doctor at Kent and Canterbury for advice. The number is 020 71 88 71 88, bleep number 1228.

If you have any questions about this procedure or your results, please contact one of our prostate cancer nurse specialists, on 01227 86 86 66 (Monday to Friday, 9am to 5pm). Out of these hours, contact the Urology Department on 01227 86 43 83.

Where can I get more information?

- **Prostate Cancer UK**

Provides support and information for men with prostate cancer.

Telephone: 0845 30 08 38 3

Web: prostatecanceruk.org/

- **Macmillan Cancer Support** (all numbers freephone)

Telephone: 0808 80 82 02 0 (information on living with cancer)

Telephone: 0808 80 01 23 4 (information on types of cancer and treatments)

Telephone: 0808 80 10 30 4 (benefits enquiry line)

Web: www.macmillan.org.uk

- **British Association of Urological Surgeons (BAUS)**

Web: www.baus.org.uk

Transperineal ultrasound-guided biopsies of the prostate gland (BAUS leaflet)

www.baus.org.uk/_userfiles/pages/files/Patients/Leaflets/Transperineal%20biopsies.pdf

Transrectal ultrasound-guided biopsies of the prostate gland (BAUS leaflet)

www.baus.org.uk/_userfiles/pages/files/Patients/Leaflets/TRUSP%20biopsies.pdf

References

Information adapted from Guy's and St Thomas' NHS Foundation Trust with kind permission.

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhufft.nhs.uk/patientinformation