



Retrospective review of transurethral water vapour therapy (REZUM) for catheter-dependent patients with benign prostatic hyperplasia in a local institute

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Objective:

To review the efficacy of REZUM in treatment of catheter-dependent BPH in local patients

Patients & Methods:

Patients with catheter-dependent BPH who underwent REZUM from April 2023 to July 2024 in Queen Elizabeth Hospital were reviewed retrospectively. The mean time of successful trial without catheter (TWOC) was evaluated, post-operative IPSS, uroflowmetry parameters including peak flow rate (Q_{max}) and post-void residual urine volume (PVRU), renal function and related complications were documented.

Results:

A total of 27 patients that were catheter-dependent had REZUM performed. Thirteen patients had refractory retention and fourteen had obstructive uropathy. They had a mean age of 77 years and a mean prostate size of 46.0 ml. Post-REZUM TWOC was successful in 23 patients (85.2%) with a mean time of 5.9 weeks.

Upon TWOC, the mean Q_{max} was 9.6 ml/s and the mean PVRU was 44.8ml.

At 6-months after REZUM, the mean Q_{max} was 10.9 ml/s and the mean PVRU was 54.2ml. The mean IPSS was 10.95 and QOL 2.5.

Four patients had failed TWOC, one underwent TURP subsequently, two patients required CISC due to detrusor underactivity and one patient died of Ca ampulla before first TWOC.

The same day discharge rate was 92.6%. There were 4 patients having Clavien-Dindo Grade I to II complications and none experienced Grade III or higher complications after REZUM. All patients did not have deterioration in renal function after REZUM procedure.

Conclusion:

REZUM is effective in treating catheter-dependent BPH.