

Patient information

Transperineal Prostate Biopsy

Urology Department

What is transperineal prostate biopsy?

Also known as template biopsy or saturation biopsy of the prostate is a technique of obtaining small tissue samples of the prostate through the skin between the back passage and the scrotum (called the perineum) and sending the samples to the histology laboratory for examination under a microscope by a specialist.

What is the prostate?

The prostate is a small gland found only in men and lies beneath the bladder and in front of the rectum (back passage). Its function is to produce the white fluid that becomes part of the semen.

What are the benefits of having this test?

This test is done to diagnose small potentially curable cancer of the prostate. Most patients will have previously undergone standard trans-rectal prostate biopsies (TRUS biopsy) with negative or suspicious findings.

A template biopsy is used to gain further information about your prostate over and above the information provided by trans-rectal biopsy. The standard trans-rectal prostate biopsy does not allow proper access to the front part of the prostate gland and this is possible with the template biopsy.

What are the alternatives?

Template biopsy is an additional diagnostic tool to give your doctor more information about the best way to treat you. It is a relatively new technique and expanding in its use. The alternative would be more extensive transrectal biopsies under local anaesthetic

What will happen if I decide not to have this procedure?

If you choose not to have this test a small prostate cancer could be missed.

How do I prepare for the test?

- Before your procedure you will be asked to attend the preoperative assessment clinic where you will be seen by a specialist nurse who will assess your general health and book any investigations you may need before attending theatre such as blood and urine tests, chest X-ray or an ECG
- You will be given instructions regarding fasting(no food or drink) before your procedure.
- Normal medication should be taken unless instructed otherwise
- You should make sure you have some painkillers at home before you come to hospital
- **If you are taking blood thinners such as Warfarin, Aspirin or Clopidogrel it is important that you let the doctor or nurse know because these may need to be stopped for several days before the operation can be done.**

What does the test involve?

You will be sent a letter explaining when and where you need to come for admission. You will be admitted to the urology ward on the day of the procedure. You will be seen by a urology doctor and an anaesthetist who will once again explain the procedure and obtain your consent.

After the preliminary admission procedure, you will be given an enema to clear your bowels and empty the rectum to help with insertion of the rectal probe at the time of the test (an ultrasound scan device is inserted into the back passage to visualise the prostate).

What sort of anaesthetic will be given to me?

You will be given a general anaesthetic. General anaesthesia is drug-induced unconsciousness: it is always provided by an anaesthetist, who is a doctor with specialist training.

Unfortunately, general anaesthesia can cause side effects and complications. Side effects are common, but are usually short-lived: they include nausea, confusion and pain.

Complications are very rare, but can cause lasting injury: they include awareness, paralysis and death.

There is a risk of damage to teeth, particularly caps or crowns and veneers. Your anaesthetist will take every care, but occasionally damage can occur.

The risks of anaesthesia and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well.

For more information, please ask for a copy of the leaflet **“You and Your Anaesthetic”** (PIF 344).

You will be given an opportunity to discuss anaesthetic options and risks with your anaesthetist before your surgery.

If you are worried about any of these risks, please speak to your Consultant or a member of their team.

The procedure is done under general anaesthesia in the lying position with the hips flexed upwards and the legs supported on a stirrup.

The template is applied on the perineum and needles inserted through the skin into the prostate for biopsies. This approach leaves roughly 20-30 puncture marks in the perineal skin in front of the back passage.

What are the risks of having this test?

- Blood in the urine is common and usually settles within two to three weeks. Rarely lasts longer. If you experience persistent or heavy bleeding each time you pass urine, you should seek medical advice from your own doctor during working hours or a walk in centre or your nearest hospital emergency department.
- Blood in the semen is common ranging from pale pink to red or brown and can last up to six weeks.
- Pain: You may experience some pain or discomfort for several days after the biopsy. Simple pain killers such as Paracetamol can be helpful during this time provided there is no contraindication to taking the drug. The discomfort is usually in the perineum but may be in the rectum or even in the throat due to anaesthetic tubes.
- Infection: You will be given antibiotics during the test to reduce the risk of infection. However if you develop a fever or significant burning and frequency of urination you should see your doctor.
- Difficulty passing urine: There is a 2% risk of retention of urine (inability to pass urine) and if that happens you will need to have a catheter (hollow plastic tube) inserted through your urine tube to temporarily drain the urine.
- More commonly, there is some difficulty emptying the bladder for the first three to four days after the test and this does not usually require catheterisation.

What happens immediately after the operation?

After your operation has finished, you will be taken to the theatre recovery suite until you are fully recovered from the anaesthetic and the anaesthetist is happy for you to return to the ward.

A nurse will check your pulse, blood pressure and breathing at regular intervals. It is important you tell the nursing staff how you feel and in particular if you feel pain.

You will be asked to have something to eat or drink and to pass urine before you are allowed home.

You should ensure that you have a responsible adult to take you home and to stay with you for 24 hours at least.

For next 24 hours you must not

- Travel alone.
- Drive any vehicle e.g. car, scooter or ride a motorcycle or bicycle.
- Operate machinery (including domestic appliances such as a kettle).
- Climb ladders.
- Make important decisions, sign any business or legal documents.
- Drink alcohol.
- Return to work within 12 hours of treatment. Your general health and any medicines you are taking may increase the time you need off work.

You should

- Take it easy for the rest of the day, avoid strenuous activity.
- Take your medications as usual.
- Let someone else care for anyone you usually look after, such as children or elderly or sick relatives.

When you are at home

Take simple pain killers if you experience pain or discomfort. Drink plenty of fluids.

If you experience heavy bleeding or if you are unable to pass urine, you should seek immediate help from your family doctor (GP), the nearest walk in centre or the nearest Emergency Department (A&E).

Your result should be available in two to three weeks and an appointment should be arranged at the time of discharge. It is always worthwhile ringing the department (number provided below) the day before you come for your result to check that the result is available.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

For general queries contact The Urology Centre

Tel: 0151 282 6809

Text phone number: 18001 0151 282 6809

For specific clinical queries contact your consultant's secretary

References for further reading

<http://www.guysandstthomas.nhs.uk/resources/patient-information/urology/enlarged-prostate/2234-transperineal-prostate-biopsy.pdf>

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