AB018. The Sectional Three lobes resection of transurethral plasmakinetic resection of prostate

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Background: To introduce the skill and key point of the sectional three lobes resection of transurethral plasmakinetic resection of prostate (PKRP).

Methods: Two thousand and one hundred twenty-six cases of benign prostate hyperplasia (BPH) underwent the sectional three lobes resection of PKRP. The prostate middle lobe at 6 o'clock was resected to mark channels. The prostate at 5 and 1 o'clock were resected, then the left lateral lobe was resected. The prostate at 7 and 11 o'clock were resected, then the right lateral lobe was resected. The top lobe at 12 o'clock was resected to mark channels. The

residual lateral lobes to cut down blood supply of prostate could be resected without bleeding. The resection was along the border of the surgical capsule of prostate without cystostomy. Finally, the prostate around the seminal hillock was TriMed.

Results: All the operations were finished successfully. The operation times were from 30–90 minutes. All patients were without major blood, TURS, cardiovascular accident. Removal the urinary tube after operations 4–7 days, all patients had no urinary incontinence.

Conclusions: The sectional three lobes resection of PKRP for BPH safe and effective, less complication.

Keywords: Plasmakinetic resection of prostate (PKRP); prostate; benign prostate hyperplasia (BPH)

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