

Joan and Sanford I. Weill Medical College

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RADICAL PROSTATECTOMY
PRE-OPERATIVE INSTRUCTIONS

- Please avoid aspirin, Motrin, Advil, and all aspirin like derivatives 7-10 days prior to surgery; please see attached list of medications to avoid.
- A letter of medical clearance is required from your PMD and/or cardiologist.
- Follow a clear liquid diet the day prior to your surgery; please see attached list.
- Midday drink 1 10 oz bottle of Magnesium Citrate. This may be purchased at any local pharmacy.
- Continue to drink clear liquids for the remaining of the day. Please do not eat solid food.
- At 7:00pm, perform a Fleet enema. This may also be purchased at your local pharmacy.
- Nothing to eat/drink after midnight.
- If you typically take your anti-hypertensive and/or cardiac meds in the morning, please discuss with your physician.
- If you are a diabetic, please check with your physician regarding your am medication.

POST-OPERATIVE PROSTATECTOMY INSTRUCTIONS

Catheter:

- You will go home with a urethral catheter in place.
- Urine leakage from around the urethral catheter is normal following surgery; occasionally a pad may be necessary.
- Please keep the catheter clean, washing with soap and water.
- Use the smaller leg bag during the day and the larger bag over night.
- Rinse drainage bags with a combination of vinegar and water.

Incision:

- The skin is closed with absorbable sutures. Steri-strips are covering the incision and should remain in place for 2 weeks.
- You may take a shower, not bath. Pat the steri-strips dry, however do not rub.

Medications:

- Prescriptions will be given during your pre-operative visit and include:
 - Celebrex 200mg
 - Vicodin 5/300mg
 - Colace 100mg
 - Cialis 5mg
- Please take as directed.
- Pain medication may cause constipation; milk of magnesia and/or 2 tablespoons of mineral oil, may be added to your daily Colace.
- Do not put anything into rectum; ie enema or suppository.
- Drink plenty of fluids and walk daily.

- *Do not lift > 5 lbs.
- *Do not strain during a bowel movement.
- *Do not sit on hard surfaces.

Phone office if temperature is above 100*.

- *Progressive swelling and/or calf pain.
- *Vomiting.
- *Catheter not draining.

Post-operative office visit

- 1-2 weeks following surgery, catheter will be removed.
- Urine and blood testing will be performed.
- Please bring pad and/or Depends to your visit.
- Eat breakfast before arriving.

Post-catheter removal:

- Incontinence is expected following catheter removal as well as leaking and/or dripping after urination.
- Urinary control returns in stages; first during the night, followed by changing positions from lying, sitting, and standing; and then coughing, sneezing, and lifting.

Kegel exercises:

- This exercise involves tightening and releasing your sphincter muscles. To isolate the muscle, stop the flow of urine mid-stream. This contraction is known as a kegel exercise.
- Please perform throughout the day; especially before sitting and standing. This will prevent stress incontinence.

Sexual Rehabilitation:

- Regaining your ability to have an erection is a gradual process. You may first notice a soft, partial am erection. This may take up to 18 months or more.
- There are no restrictions on having intercourse following surgery. You may begin sexual activity when you feel ready.
- Since the prostate gland that produces fluid has been removed, you will have little or no fluid when ejaculating.
- It is possible to climax with stimulation, even if erections are partial.
- ED medication may help to hasten the return of function.
- Do not become discouraged.

Follow-up:

- Office visit every 3 months for the first year.
- PSA every 3 months for the first year.

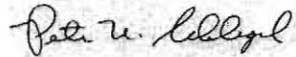
Pathology:

The pathologist will microscopically examine the prostate and lymph nodes. The written report will provide details of how much cancer was present in the gland and how aggressive it was. This will help determine how long you should be followed for a possible recurrence of the cancer. You will primarily be followed

with a PSA blood test. With your prostate removed, the only source of PSA can be from recurrent prostate cancer. It is expected that your PSA will drop to undetectable levels within 1 month of surgery. Persistent undetectable PSA levels (<0.1ng/ml) are consistent with cure of this cancer.

Most men do very well following this operation and are cured. I stand ready to help you with this process.

Sincerely,



Peter N. Schlegel, M.D.
Professor & Chairman,
Department of Urology

Kegel Exercises

The pelvic floor muscles are a group of muscles that support the bladder, urethra, and bowel. You should contract these muscles on a regular basis, at least 5 times per hour, 15 sets per day. Regular contraction of these muscles will lead to a strengthening of these muscles. The key is exercising the correct muscles. Some common mistakes are using your abdominal and buttock muscles. To ensure you are not tightening the buttock muscle, sit in front of a mirror and squeeze your pelvic floor muscles. If you see your body moving up and down, you are contracting the wrong muscles. To avoid using the abdominal muscles, try contracting the pelvic floor muscles while placing your hand over your abdomen. Do you feel your abdominal muscles tightening up? If so, relax and try again. It is important to separate these two muscle groups. When abdominal muscles are tightened, they can put pressure on the bladder and cause urine to leak. If you find yourself holding your breath, you are probably using your abdominal muscles.

The way to identify the correct muscles is to go to the toilet and begin to void. Once the stream has started, contract the pelvic floor muscles and try to stop the flow. If you can slow the stream or stop the stream you are doing the exercise correctly. Daily exercise of these muscles has a dual function. First, the exercise strengthens the muscles in order to prevent urinary leakage and secondly, through repetition, you will begin to regain control over these muscles. You should also practice these exercises when you walk, before you sneeze, before standing and sitting, and on the way to the bathroom. If you find yourself contracting the wrong muscles..STOP, rest, relax, and begin again using the pelvic floor muscles.

The exercise involves squeezing and relaxing the pelvic floor muscles. Squeeze the muscles for 3 seconds and then relax for 3 seconds. Make sure you hold the contraction for the full three seconds and relax for the full 3 seconds. At first, any new exercise is difficult to learn, but over time it will become easier. Eventually these exercises will become a part of your daily routine. When done correctly, no one will know you are practicing them. They can be practiced anytime, anywhere. The exercises can be done sitting, standing, and lying. It is important to be comfortable with all three so you can gain control in all three.

These exercises cannot harm you in any way. Most patients find them relaxing. If you experience stomach or back pain following these exercises, you are probably contracting too hard and using you abdominal muscles. If you experience headaches, you are probably holding your breath. If you have any question, please feel free to contact me.

Kegel Exercises

Kegel exercises are recommended for both women and men who experience any degree of urinary leakage. They are designed to strengthen the muscles around the bladder and bladder opening. By exercising these muscles, you may improve your symptoms.

It is important that you perform the exercises correctly to gain the maximum benefits from these exercises.

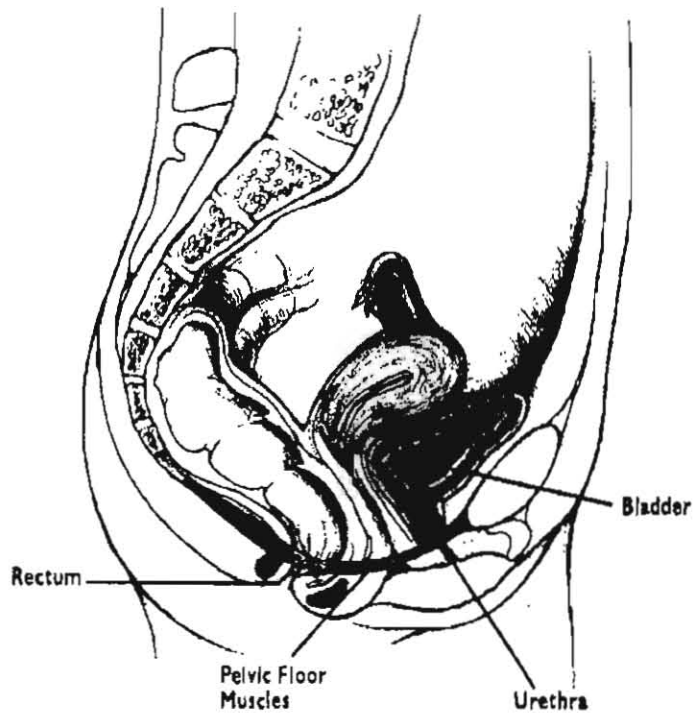
Finding The Pelvic Muscles

Tighten your rectum as if you are trying to control passing gas or pinching off a stool. Do not tense the muscles of your legs, buttocks or abdomen, and do not hold your breath. You can also imagine you are stopping the flow of urine. When men tighten the muscles, the penis will move up and down.

If you are unsure you are using the proper muscles, or if your symptoms do not improve, ask your physician, nurse or therapist to help you identify the muscles.

How To Do The Kegel Exercises

- Exercise is best done after emptying your bladder.
- Tighten the muscles and hold for 3 to 5 seconds. As your muscles get stronger, you should be able to tighten your muscles for 10 seconds or longer.



- Relax for 3 to 5 seconds or for as long as you tightened the muscles.
- Breathe normally.
- Do 5 to 7 exercises at a time, 3 times a day. Increase up to 15 exercises at a time, 3 times a day.

When To Exercise The Muscles

The Kegel exercises can be done anywhere or anytime – sitting, lying or standing. People around you will not even know you are doing them. Just develop a routine so you remember to exercise every day. Do these exercises when you have an incontinent episode. For example, if you are experiencing urine leakage on the way to the bathroom, stop and exercise your pelvic muscles until the leakage passes then continue to walk to the bathroom. If you leak

urine when you cough, tighten the muscles quickly when you cough.

Things To Remember

- Tighten the pelvic floor muscles only. DO NOT tighten leg, buttocks or abdomen muscles.
- Breathe normally when exercising.
- Exercise takes time to strengthen the muscles. You should start noticing less leakage after 4–6 weeks of consistent daily exercise and even a larger difference after 3 months. If you do not see an improvement, you may not be exercising the correct muscles. Please revisit your health care professional periodically for advice.

From *Working with the Incontinent* by Dr. Robert M. Marder

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MEDICATIONS TO AVOID BEFORE SURGERY

The following drugs contain aspirin or other products, which can cause increased bleeding during surgery and should not be taken for 10 days prior to surgery. If you should need to take something for relief of minor pain, you may take Tylenol.

Advil	Doan's Regular and	Naprelan
Aleve	Extra Strength	Naprosyn
Alka Seltzer	Dolobid	Naprosyn Pepto Bismal
Alcohol	Dristan	Tablets and Liquid
Anacin	Duradyne Tablets	Naproxen
Anaprox	Easprin	Norgesic forte
Ansaid	Ecotrin	Orudis
Arthrotec	Empirin	Oruvail
Aspirin	Enbrel	Oxaprozin
APC	Equagesic Tablets	Percodan
BC Tablets or Powder	Etodolac	Persantine
BC Cold Powder	Excedrin	Piroxicam
Brufen	Feldene	Plavix (Warfarin)
Bufferin	Florinal	Quagesic
Cama Arthritis Pain	Flurbiprofen Sodium	Relafen
Reliever	4 Way Cold Tablets	Robaxisal
Cataflam	Goody's Headache	Rufen
Celebrex	Powder or Tablets	Sine Aid
Cephalgesics	Ibuprofen	Soma Compound
Clinoril	Indomethacin	Sulindac
Cogesprin	Indocin	Trandate
Coricidin	Ketoprofen	Trental
Coumadin	Lodine	Trillsate
Darvon	Meclomen	Vanquish
Darvon with Aspirin	Medipren	Vitamin E
Daypro	Meloxicam	Voltaren
Diclofenac	Midol 200	Wesprin
Diflunisal	Midol PMS caplets	Zavtrin
Disalcid Tablets or	Mobic	Zoprin
Capsules	Motrin	Herbal Supplements
	Nabumeton	

Before stopping any of these medications, be sure to consult the physician who ordered them. Some, such as Coumadin (Warfarin) and Plavix, are ordered to prevent or treat serious conditions such as "deep venous thrombosis", "pulmonary embolisms", and other heart problems. This is not an all inclusive list. If you are unsure if you are taking an aspirin product or an anti-inflammatory, please ask your doctor, nurse or pharmacist.

Clear Liquid Diet

<u>Type of food</u>	<u>Amount</u>	<u>Food Included</u>	<u>Food Excluded</u>
Soups	As desired	Clear consommé Broth, bouillon Packaged broth	Any other including puree
Fruit Juice	As desired	Apple juice White grape juice Cranberry juice Clear Soda: 7 UP , Sprite, Gingerale Gatoraide Crystal Light drinks	Any other
Other Beverages	As desired	Sanka, weak tea, Postum coffee(black)	Milk, milk prods. Cream, any other
Desserts	As desired	Jello, frozen ices, Gelatins	Ice Cream, any other
Sweets	As desired	Granulated sugar Sugar candy, gum	Any other

Clear liquids are basically anything you can see through. When having soups, make sure you can see through them and that they have no pieces of vegetables. When having Jello or frozen ices, there should be no pieces of fruit.