

OUR LAST WEBINAR ON REPLAY

URINARY, SEXUAL OR INTESTINAL PROBLEMS?
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PRESENTED BY



PARTNER



HERE ARE 5 POINTS TO REMEMBER.

1. WHAT IS THE BEST TREATMENT OPTION - SURGERY VS RADIATION THERAPY AND THE BEST SURGICAL APPROACH - ROBOTIZED VS OPEN - TO MINIMIZE SIDE EFFECTS?

There is no one treatment superior to another. Rather, we want to find the most appropriate treatment based on your age, family or health history, your type of cancer when diagnosed, and concerns about your quality of life and sexual and urinary function.

Although postoperative recovery is easier with robotic surgery, it is more of the surgeon's experience which will guarantee the success of the intervention and not the type of surgery

2. DO THE TECHNIQUE OF PRESERVING THE ERECTILE NERVES ALLOW ALL MEN TO RECOVER THEIR ERECTILE FUNCTION?

Non. It is certain that an erectile function which is good prior to surgery will allow a potential of recovery which will be good. It is important to keep in mind two things: (1) the younger you are, the better your chances of having erections again after surgery and (2) the treatment of prostate cancer causes changes in your sexual function in general.

3. WHAT ABOUT PENIAL REHABILITATION?

The recovery of your erectile function, if the nerves have been preserved, requires stimulation, which can begin after the catheter has been removed. Drugs can be prescribed to stimulate an erection, but without stimulation you are no further ahead. Another approach is the use of the penile pump. It is useful because it brings an influx of blood into the penis and thus provokes an erection. That said, all of this requires patience, persistence and resilience. In other words, to participate in a marathon, you must jog and train. Same here.

4. FROM HOW MANY MONTHS OF INCONTINENCE SHOULD I WORRY?

After surgery, virtually all men have a transient period of urinary incontinence. It can last a few weeks to a few months (average 3 to 6 months). For some men, patience will be required as recovery may take longer (6 to 9 months) and even up to 2 years. It varies from person to person depending on the degree of disease, age and state of health. It usually disappears over time, with the practice of certain exercises (Kegels), with the support of a physiotherapist and surgery if it continues.

5. WHAT ARE THE POSSIBLE URINARY AND INTESTINAL PROBLEMS FOLLOWING RADIATION THERAPY?

Side effects of radiation therapy may include inflammation of the bladder which causes urgent need to urinate, difficulty urinating, burning sensations when urinating, but over time these symptoms decrease. Do not be surprised if you spend more time in the bathroom than usual. Indeed, given the proximity of the prostate and the rectum, gastrointestinal disturbances may occur. They usually go away after treatment, but some can last for months or appear late. Changes to your diet can often alleviate this disorder. In all cases, in the presence of severe symptoms of urinary or intestinal disorders, treatment should be considered.