

A worry with the waterworks (answers on page 49)

Part one

Nuri, a 68-year-old man originally from Gujarat in India, but now living in East Africa, had prided himself in being healthy all his life. He had never been in hospital, and whenever he was ill preferred to follow Ayurvedic principles and to take herbal medicines. So he looked upon his 'little difficulties' in passing urine as simply due to his age. Sadly, he left things a little late before he eventually arrived at the clinic. His history should leave you in no doubt about the diagnosis, but other aspects of his case may offer a challenge. Four years before his admission as an emergency he noticed that he was taking longer than before to empty his bladder. The flow of urine was not as full or as fast. As the months progressed he had to wait longer than usual before he could start to pass urine. By now you are already onto the diagnosis.

- Q1 Which of the other symptoms of his illness would you expect him to have as time passes?**
 (a) Increase of frequency of micturition
 (b) The feeling that after micturition the bladder is still not empty.
 (c) Urgency. (d) Ever more frequent nocturia. (e) Dysuria. (f) Haematuria.
- Q2 If Nuri had come to see you in this period, how would you proceed?**
 (a) Send him to a urological unit for urodynamic studies. (b) Prescribe tamsulosin.
 (c) Prescribe finasteride. (d) Prescribe both of the above.
 (e) Perform a rectal examination. (f) Take blood for prostate-specific antigen analysis.

Part two

The herbal medicines did not appear to stop or prevent his symptoms, but Nuri felt that they were bearable, and did not seek medical help. He went on holiday to India, and on the way back, by plane, he started to feel unwell. The plane had been several hours delayed on the tarmac in India before it took off, so that he had been in the cabin for more than 9 hours altogether. During that time he did drink water, and took no alcohol, but he felt particularly tired, and he noted for the first time that his penis burned on passing urine, and was painful for a few minutes afterwards. He had increased frequency of micturition, slight fever, urgency, and he noted that it was now much more difficult to start and to maintain micturition. So at last he visited his doctor, who took a urine sample for analysis.

Part three

- Q3 What did his doctor decide to do now?**
 (a) Give nitrofurantoin for a suspected urinary infection.
 (b) Start him on finasteride.
 (c) Start tamsulosin.
 (d) Refer urgently to the urological unit.
 (e) Wait and see how the antibiotic treatment worked before giving other treatments.
 (f) Take bloods for renal function (us and es, egfr, etc.).
 (g) Perform an ultrasound post-micturition.

Part four

The antibiotic settled Nuri's fever and urethritis, so he tried to settle at home, and followed his doctor's advice to drink plenty of water. Three days later his difficulty in starting micturition became much worse, and he was unable to pass any urine at all. He had severe abdominal pain and lower abdominal tenderness, and his wife took him to the hospital emergency department, where he was catheterised. The staff retrieved 1500ml of urine. This made the diagnosis certain.

- Q4 How did the urological staff proceed?**
 (a) Give him an indwelling catheter with a leg bag at home for a few days before an in-ward catheter-free trial.
 (b) Do as above, but with a flip-flow catheter instead of a bag.
 (c) Proceed directly to a prostatectomy.
 (d) Give finasteride as an acute prostate-shrinking drug.
 (e) Change the antibiotic on the basis that the urinary infection had produced the symptoms.

Part five

Three weeks later, Nuri had a trans-urethral resection of the prostate (TURP). Three days after the surgery his catheter was removed and he had good free-flowing micturition. However, he noted several problems after leaving hospital.

- Q5 Which of the following is normal after a TURP?**
 (a) Bleeding at the start of micturition for more than a week.
 (b) Permanent loss of ejaculation. (c) Impotence. (d) Incontinence.
 (e) Regrowth of the prostate so that another operation is needed in a few years.
 (f) Sudden passing of blood and tissue in the urine 3 weeks after surgery

Nuri recovered well from his surgery and is now passing urine normally with full flow. He looks on his experience with great satisfaction, and has now turned to his modern orthodox doctor for his health needs. His wife is delighted that he has done so.