



Oxford University Hospitals
NHS Foundation Trust

Transrectal prostate biopsy under local anaesthetic

Information for patients



Why have I been given this leaflet?

You have been given this leaflet because you are due to have a transrectal ultrasound (TRUS) guided prostate biopsy. This will be carried out under local anaesthetic at the Wytham Urology Outpatient Department at the Churchill Hospital.

Please read this leaflet before your appointment. The doctor or nurse practitioner will go through the information with you at your appointment and answer any questions you may still have.

What is a transrectal ultrasound guided prostate biopsy?

A prostate biopsy involves taking small samples of tissue (biopsies) from the prostate. Approximately 10-14 biopsies will be taken, although this will depend on your prostate size and individual circumstance. These are examined under a microscope by a specialist to check whether there is cancer in the prostate.

A transrectal biopsy involves taking samples through the rectum (back passage).

You may be offered a transrectal biopsy because:

- You have a high PSA (prostate specific antigen) blood test level, which may indicate that you have prostate cancer.
- You have a suspicious area which has been seen on an MRI scan.
- You have a strong family history of prostate cancer.
- You have known prostate cancer that has not needed treating, but your doctor wants to check whether the cancer has changed and may require treatment.

There is a separate leaflet called 'The Prostate Pathway' which explains why you are being investigated for prostate cancer. Please ask for this if you were not given it by your GP, or you can access it on the OUH Trust website.

What are the alternatives to this procedure?

- Transperineal ultrasound guided prostate biopsies, usually carried out under local anaesthetic, where the biopsies are taken through the perineum, which is the area of skin between the scrotum and the rectum (back passage).
- Further monitoring of your PSA or a repeat MRI scan.

The most suitable option will be discussed with you at your consultation. Most prostate biopsies in this Trust are transrectal biopsies.

Preparing for your transrectal biopsy

Can I eat and drink before the biopsy?

Yes, please ensure that you have breakfast or lunch before your appointment.

Should I take my usual medication on the day of the biopsy?

Your usual medication can be taken as normal, however you may need to stop or change your routine for those listed below.

Anticoagulants

If you take warfarin, this should be stopped 5 days before your biopsy. You should have an INR check the day before at your GP surgery.

Your urology doctor or nurse practitioner should have gone through your medicines with you and discussed whether you need heparin injections whilst you are off your warfarin (known as 'bridging therapy').

It is important to inform us if you are taking any other anticoagulant (such as rivaroxaban, apixaban, dabigatran or edoxaban). Your urology doctor or nurse practitioner will advise you when to stop taking these before your biopsy.

Antiplatelets

You can continue to take low dose (75mg) aspirin.

Clopidogrel and other antiplatelet medicines should be stopped 7 days before the biopsy. If you are taking clopidogrel or another antiplatelet because you have had coronary (heart) stents inserted within the last year, please contact the Urology Nurse Practitioners to discuss, before you stop your medication.

Immunosuppressant or steroid therapy and antibiotics

Please contact the Urology Nurse Practitioners before your biopsy to discuss these medications, including if you are started on a short course of antibiotics.

Please telephone the Urology Nurse Practitioners if you are unsure which medications you should stop taking. Tel: 01865 572373

What do I need to bring to the appointment?

Please bring:

- a list of your current medications
- a dressing gown and slippers.

What should I expect when I arrive?

Please come to the reception at the Wytham Urology Outpatient Department. You should expect to be in the department for about 2 hours once we start preparing you for your biopsy. This gives us time to prepare you for the biopsy and make sure you are well afterwards. The biopsy appointment is 30 minutes but the actual biopsy takes about 5-10 minutes. ***(Please note – If you have been seen in the Consultant clinic on the morning of your biopsy you should expect to be in the department for between 4 and 6 hours, depending on your appointment time).***

Please bring a fresh urine specimen with you (within the last 2 hours). You can collect a specimen pot when you attend for your MRI scan. This is to check that you do not have a urine infection. If you do, this may mean we cannot go ahead with the biopsy until it has been treated. (Don't worry if you have not been able to collect a specimen pot as we can give you one when you arrive in the outpatient department).

A nurse will go through your medications with you and ask you some questions. You will be given some antibiotics by mouth. These are to help prevent infection and need to be taken 40-60 minutes before your biopsy. You will be asked to change into a hospital gown and remove your lower clothes.

What should I expect during the biopsy?

You will be asked to lie on your left hand side on a couch, with your knees bent up towards your chest.

The doctor/nurse practitioner, will feel your prostate by placing a finger in your 'back passage' (this is called a digital rectal examination, or DRE). They will then insert an iodine-soaked sponge into your rectum to clean it. The sponge is also covered in lubricating jelly to help insertion of the probe. **Please let us know if you are allergic to iodine** beforehand.

An ultrasound probe, covered in lubricating jelly, is then inserted into your 'back passage'. This allows them to see an image of your prostate on the ultrasound screen, which they will use to guide the biopsies. Inserting the probe can be uncomfortable, but should not hurt.

You will then be given an injection of local anaesthetic (lidocaine), through the wall of the rectum to the area either side of the prostate. The anaesthetic will then be given a few minutes to take full effect.

The biopsies are taken with a device that contains a spring loaded needle. This is passed down a port that runs alongside the ultrasound probe. You will hear a loud 'click' sound and feel a flicking sensation as the biopsy is taken. You may find the whole procedure uncomfortable, but you should not find the biopsies painful. Please tell us if you are finding the procedure too uncomfortable.

What should I expect after the biopsy?

After the biopsy you can get up slowly and get dressed. It is important to take this slowly, as you may feel lightheaded after the procedure.

If you feel faint or unwell after leaving the biopsy room, please tell the nurse. We recommend that you have someone to drive you home afterwards.

What are the risks and side effects of having a transrectal prostate biopsy?

Most procedures have possible risks and side effects. Your doctor/nurse practitioner will go through these with you before the procedure. Please let them know if you have any questions or concerns.

Blood in your urine. Almost all people will have some blood in their urine. This will generally last for a few days but may continue for several weeks. Drinking plenty of fluids will help to flush through any blood. Do not worry about the blood in your urine unless you feel unwell. You can contact the nurse practitioners or your GP for advice if you are concerned.

Blood in your stools. Almost all people will have some blood mixed in with their stools. This will generally last for a few days.

Blood in your semen. Almost all people will see some blood in their semen. The semen can be discoloured for up to six weeks. This poses no problem for you or your sexual partner.

Urine infection. Up to 10 out of 100 people may get a urine infection requiring antibiotics. There is a risk of developing a urine infection because the biopsy spring loaded needle passes through a 'contaminated' area (from stool in the rectum) to a 'clean' area (in the prostate).

Septicaemia (sepsis or 'blood poisoning'). Up to 2 in 100 people may get infection in the blood stream, which can be life threatening and needs prompt treatment in hospital with intravenous antibiotics. See below for when to seek help.

Aching or discomfort. Up to 50 in 100 people may experience aching or discomfort in the prostate following the biopsy.

Unable to pass urine (urinary or clot retention) – up to 2 in 100 people may have difficulty passing urine and may require a catheter for a few days to help drain urine from the bladder.

Temporary problems with erections, caused by bruising from the biopsies – up to 5 in 100 people may experience this.

Research

This Trust is taking part in the government funded PathLAKE digital pathology initiative. At the moment, your biopsy samples are looked at under a microscope; part of this initiative is to develop a computer system to examine the samples on a screen instead, which we believe will benefit patients in the longer term by providing an improved service. This research, which may be funded by industry partners, also involves us looking at ways of building artificial intelligence tools (purpose-built computer programmes) to speed up diagnoses and improve outcomes.

You can tell us if you object to data relating to you being used for this type of programme and if you do not wish to take part, please inform the doctor or nurse practitioner taking the consent for your procedure. Alternatively you can choose not to take part by contacting:

The Oxford Radcliffe Biobank Manager, Oxford Radcliffe Biobank, Nuffield Department of Surgical Sciences, Level 6, room 6607, John Radcliffe Hospital, Oxford OX3 9DU

If you are happy to take part your personal details will be anonymised and no-one using the data for research purposes will be able to identify you. Taking part does not require anything from you and makes no difference to the diagnosis or any treatment you receive. It just means that we can use your samples after your diagnosis is made.

For further information please see:

<https://www.ouh.nhs.uk/privacy/default.aspx>

<https://www.gov.uk/government/news/artificial-intelligence-to-help-save-lives-at-five-new-technology-centres>

What should I look out for after the biopsy and at home?

- We advise that you arrange for someone else to drive you home after the biopsy as you may feel lightheaded. If you have to drive yourself please allow a couple of hours after the procedure to make sure you feel well enough to drive.
- You may have discomfort in the biopsy area for one or two days. Please take it easy for 48 hours, avoiding physically demanding activities. If you need to, you can take paracetamol or your usual pain relief (following the dosage instructions with the packaging). You can generally return to work the next day if you feel well, and your job is not physically demanding.
- You are likely to see blood mixed with your urine, stool and semen. Drink plenty of non-alcoholic fluid while there is blood in your urine, in order to flush any blood through.
- Take your antibiotics as instructed and make sure you complete the whole course.
- If you are in a same sex relationship, please speak to the nurse practitioner or doctor doing your biopsy, for further advice.
- If you think you are getting a urine infection, please contact your GP and take a urine sample to your GP surgery to be tested.

Signs of a urine infection include:

- o cloudy and offensive smelling urine
- o pain when passing urine.

Please go to your nearest Emergency Department immediately if:

- you develop a high temperature (above 37.5°C/chills and shivering)
- after trying for 2 hours you are unable to pass urine, despite having a full bladder and drinking plenty of fluid.

When will I hear about my results?

It can take 2 to 3 weeks to get the results back from the lab. Within three weeks you should expect either a letter or a phone call giving you an appointment to discuss your results. If you have not heard within three weeks please contact the Prostate Pathway Assistant, on 01865 234444. They will not be able to give you your results but can make sure your appointment is booked.

Further information

Prostate Cancer UK

www.prostatecanceruk.org

British Association of Urological Surgeons

www.baus.org.uk/patients

How to contact us

If you are unable to come for your appointment or have a query about your appointment time please contact the waiting list office:

Tel: **01865 234 444** – option 2
(8.00am to 5.00pm, Monday to Friday)

To contact the Urology Nurse Practitioners:

Tel: **01865 572 373**
(8.00am to 4.00pm, Monday to Friday)

Please leave a message and we will call you back.

If you need an interpreter or would like this information leaflet in another format, such as Easy Read, large print, Braille, audio, electronically or another language, please speak to the department where you are being seen. You will find their contact details on your appointment letter.

Making a difference across our hospitals

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OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)



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