

Having a transperineal prostate biopsy

Information for patients

This leaflet should help to answer some of your questions about having a transperineal prostate biopsy. If you have any further questions, please speak to a doctor or nurse caring for you.

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your name and date of birth and check your ID band. If you do not have an ID band we will also ask you to confirm your address. If we do not ask these questions, then please ask us to check. Ensuring your safety is our primary concern.

What is a prostate biopsy?

Prostate glands are only found in men and are about the size of a walnut. Your prostate gland is located just below your bladder and in front of your rectum (back passage). Its function is to produce white fluid that becomes part of your semen.

A prostate biopsy is where small samples of tissue are taken from your prostate gland. The samples are then sent to be examined under a microscope by a specialist. A transperineal template biopsy is used to gain further information about the health of your prostate.

Due to the special way in which the specimens are prepared, the results can take up to two weeks to come back.

Why do I need a prostate biopsy?

There are several reasons why you might have been advised to have a prostate biopsy:

- Your doctor or nurse specialist may have found a lump or abnormality during a digital rectal examination (DRE). A DRE is where a doctor feels your prostate gland through your rectum (back passage) with their index finger.
- You may have had a blood test showing a high level of prostate-specific antigen (PSA). PSA is a protein that is released into your blood from your prostate gland. High levels of PSA may indicate cancer.
- You may have had an MRI scan which suggests that further investigations are needed to either exclude or diagnose cancer.
- You may have had previous biopsy results that came back with no evidence of cancer, but your PSA blood test is still suspicious.
- You may have a known diagnosis of prostate cancer that has not previously required treatment and your doctor or nurse specialist might want further information to plan for possible treatments or observation.

The biopsy can help to find out whether any of your prostate cells have become cancerous or, if you have pre-existing cancer, whether the cancer has changed. It can also diagnose other conditions such as benign prostatic hyperplasia (enlargement of the prostate), prostatitis (inflammation of the prostate, usually caused by a bacterial infection) or prostatic intraepithelial neoplasia (PIN), which is a change in the cell type but is not cancer.

How is the biopsy done?

Using an ultrasound probe in your rectum, we take samples of the prostate from a different angle through the perineum (the skin between your scrotum and rectum). This procedure is carried out under local anaesthesia (medication used to numb a specific area of your body), so you are awake during the procedure.

What is ultrasound?

Ultrasound is a way of seeing different body parts using high frequency sound waves to create images of your internal structures. The sound waves bounce off tissues and organs and are picked up and then displayed on a screen.

Because your prostate gland is in front of your rectum, a small ultrasound probe can be inserted into the rectum to create an image of your prostate gland. This is called a trans-rectal ultrasound or TRUS. This will help to guide your doctor or specialist nurse when they perform the biopsy.

Giving my consent (permission)

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves. If you would like more information about our consent process, please speak to a member of staff caring for you.

What are the risks?

Although serious complications are rare, every procedure has risks. Your doctor will discuss these with you in more detail:

- **Infection:** This can happen to one in 100 patients. You may require antibiotics, however this will be assessed at the time of your biopsy. **If you have an allergy to antibiotics, please let the doctor know.** If you develop a fever or have pain or a burning sensation when you pee, you may have an infection and should seek medical attention from your nearest A&E department.
- **Blood when you pee:** This is not uncommon and can range from peachy coloured urine to rose or even a dark claret colour. It is rarely a sign of a serious problem. Increasing your fluid intake will usually help 'flush the system' and clear any bleeding. However, if there is persistent or heavy bleeding every time you pee you should go to your nearest A&E department.
- **Difficulty peeing:** It is possible that the biopsy may cause an internal bruise that causes you difficulty peeing. This can happen in two in every 100 cases and is more likely to happen in men who had difficulty peeing before having the biopsy. Should you have difficulty peeing, you may need a catheter, and you will need to go to your nearest A&E department for assessment. A catheter is a hollow, flexible tube that drains urine from your bladder.
- **Allergic reaction:** It is possible that you may have an allergic reaction to the medication we give you. Although the risk of this is low (less than one in 1,000 cases), you can reduce this risk by letting us know if you have had any previous allergic reactions to any medications or food.

Before the biopsy – IMPORTANT

Before you have a biopsy, you should let the doctor or specialist nurse know if you:

- **are taking any medications, particularly:**
 - **antibiotics** – we may advise you to take antibiotics before or after the biopsy and need to make sure you are safe to do so
 - **anticoagulants** (medication that helps to prevent blood clots from forming, including aspirin, warfarin, clopidogrel, rivaroxaban or dipyridamole) – if this medication is not safely adjusted before your biopsy, your procedure may need to be cancelled
- have allergies to any medications, including anaesthetic
- have or have ever had bleeding problems
- have an artificial heart valve.

What will happen on the day of my biopsy?

You should eat and drink as normal on the day of your biopsy.

You should continue to take all your medications as normal, unless you have been told otherwise by the doctor who organised your biopsy (see 'Before the biopsy – IMPORTANT' above).

The biopsy is carried out under local anaesthetic as a day case. This means you can come into hospital, have the biopsy and leave on the same day. You will be sent a letter telling you when and where to come on the day of your admission.

Once you have been admitted to the day unit, you will see your urology doctor or nurse specialist, who will go through the procedure again with you and ask you to sign the consent form. You will be given the opportunity to ask questions.

You will be asked to lie on the specially modified couch, and your legs will be placed in supportive stirrups. Your doctor or nurse specialist will use a special gel to relax your bottom muscles and examine your prostate with a finger in the rectum. They will then further perfect your position, taping your scrotum out of the way and lifting your legs so that your hips are bent as far as possible. If you find this position difficult, let the doctor or nurse specialist know.

The doctor or nurse specialist will use an antiseptic solution to clean the skin between your scrotum and your rectum, which is the area through which the biopsies are taken.

You will be given an injection of the local anaesthetic, which will numb the treatment area so that you do not feel any pain during the procedure. The injection will sting for a few seconds at first (a bit like having an injection at the dentist).

It is a three-stage process and once the anaesthetic has had time to work, although you may find the procedure uncomfortable, you should not feel pain.

The ultrasound probe is covered in gel to make the passage into the rectum easier. The probe will be in your rectum throughout the procedure so that your doctor or nurse specialist can see your prostate. They will use a grid to map your prostate. Very fine needles are then passed through the numb skin, taking biopsies of your prostate in a systematic fashion through the grid.

The prostate biopsies are taken with a device that contains a spring-loaded needle. The needle is inserted into the prostate gland and removes a tissue sample very quickly. You will hear a click as the needle is used to take the biopsy. Normally, up to 20 biopsies are taken. You may feel a brief, sharp pain as the biopsy needle is inserted into the prostate gland.

After the biopsy

You will need to pee before you can leave the unit. You will be asked to rest for about four hours at home after this.

When you are at home

You may have mild discomfort or bruising in the biopsy area for one or two days after the biopsy. You may also notice some blood in your urine for a few days. You should drink plenty of non-alcoholic fluids while you have blood in your urine. Your semen may be discoloured

(pink or brown) for up to six weeks, and occasionally longer, after the biopsy. This is nothing to worry about and poses no risk to you or your sexual partner.

If you are experiencing discomfort, take regular paracetamol. Follow the instructions on the packaging.

Biopsies under general anaesthetic

In rare circumstances, it may be clinically necessary to have the transperineal biopsy under a general anaesthetic. The anaesthetic will be given through a small needle inserted into the back of your hand. This will make you sleep for the whole procedure. You will wake up in the recovery room, and your surgeon will see you before you leave hospital.

You will need someone to help you home, as your muscles may ache and you may feel woozy because of the anaesthetic. General anaesthetic takes 24 to 48 hours to wear off, so please rest for this period.

If you have a general anaesthetic, you will be told in advance when to stop eating and drinking before the procedure.

Please go to your local accident and emergency (A&E) department if:

- your pain increases
- you have a fever higher than 100.4°F (38°C)
- you do not pee for eight hours
- you start to pass large clots of blood
- you have persistent bleeding

If you need to visit your local A&E, please ask them to call King's College Hospital switchboard on 020 3299 9000 and ask to speak to the on call Urology doctor for advice.

Your results

An appointment will be made within two weeks of your prostate biopsy, either by text or telephone call, to discuss your results.

Contacting the Urology Department

If you have any questions about this procedure or your results, please contact one of our Urology cancer nurse specialists (Monday to Friday, 8am to 5pm), on 020 3299 4352 or 020 3299 1371 (King's College Hospital, Denmark Hill) or 01689 864502 - option 5 (Beckenham Beacon).

Other support at King's

King's Macmillan Information and Support Centre

Ground floor, Cicely Saunders Institute, King's College Hospital

020 3299 5228

kch-tr.macmillan1@nhs.net

Further information

Prostate Cancer UK

Provides support and information for men with prostate cancer.

0800 074 8383

www.prostatecanceruk.org

Macmillan Cancer Support

Supporting people with cancer to get the best care the UK has to offer.

0808 808 0000

www.macmillan.org.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

111

111.nhs.uk

NHS

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

www.nhs.uk

IMPORTANT!

Please follow the instructions given to you either by the nurse specialist or doctor regarding your medication in preparation for your prostate biopsy.

Failure to do so may result in your prostate biopsy procedure being cancelled.

MyChart

Our MyChart app and website lets you securely access parts of your health record with us, giving you more control over your care. To sign up or for help, call us on 020 3299 4618 or email kings.mychart@nhs.net. Visit www.kch.nhs.uk/mychart to find out more.

Sharing your information

King's College Hospital NHS Foundation Trust has partnered with Guy's and St Thomas' NHS Foundation Trust through the King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas' hospitals. King's College Hospital and Guy's and St Thomas' NHS Foundation

Trusts share an electronic patient record system, which means information about your health record can be accessed safely and securely by health and care staff at both Trusts. For more information visit www.kch.nhs.uk.

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams.

Tel: 020 3299 4618

Email: kings.pals@nhs.net

If you would like the information in this leaflet in a different language or format, please contact our Interpreting and Accessible Communication Support on 020 3299 4618 or email kings.access@nhs.net