

## Common Concerns of Recently Diagnosed BPH Patients

### “Do I have cancer?”

Benign prostatic hyperplasia (BPH) is not the same as cancer. But if BPH is left untreated, the prostate can continue to grow and may result in the need for surgery. That’s why it’s so important that the patient maintain an open dialogue with you about his condition.

### “What will BPH do to my sex life?”

A lot of men diagnosed with BPH are worried that they will not be able to get or maintain an erection, or that their libido will diminish. Knowing that neither BPH nor its treatment cause impotence or affect sexual drive can be reassuring.<sup>1</sup>

### “Will I need surgery?”

Your patient will be relieved to know that surgery is often a last-line treatment option. Several changes in behavior can help some patients avoid surgery. For instance, reducing fluid intake at night can help relieve symptoms.

Other patients may best be treated with medication. In the event that medication alone does not effectively relieve symptoms, however, let him know that there are several trusted, minimally invasive surgical options.

### “Will BPH get worse as I get older?”

Reassure your patient that although the prostate tends to grow larger with age,<sup>2</sup> symptoms of BPH do not have to control his life. BPH is a common, highly treatable condition. With the proper measures, it’s possible to relieve the symptoms of BPH and prevent them from progressing further.

Caution should be exercised with concomitant administration of warfarin and FLOMAX. In addition, FLOMAX should be used with caution in combination with cimetidine, particularly at doses higher than 0.4 mg. FLOMAX is contraindicated in patients known to be hypersensitive to tamsulosin HCl or any component of FLOMAX. Patients with end-stage renal disease have not been studied.

As with other alpha-adrenergic blocking agents, there is a potential risk of syncope. Patients beginning treatment with FLOMAX should be cautioned to avoid situations where injury could result should syncope occur. The most common side effects are dizziness, abnormal ejaculation, and rhinitis.

<sup>1</sup>National Kidney and Urologic Diseases Information Clearinghouse (NKUDIC). Sexual function after surgery. Available at: <http://kidney.niddk.nih.gov/kudiseases/pubs/prostateenlargement/> Accessed June 9, 2005.

<sup>2</sup>National Kidney and Urologic Diseases Information Clearinghouse (NKUDIC). BPH: a common part of aging. Available at: <http://kidney.niddk.nih.gov/kudiseases/pubs/prostateenlargement/> Accessed June 9, 2005.