

Newsletter Issue 43, Dec 2023 HONG KONG CONTINENCE SOCIETY 香港理遺學會



International Continence Society (ICS) Annual Meeting 2023, Toronto (27-29 September, 2023)



Continence Care We Care, We Share

Editorial Board:

Ms. WONG Siu Wan Arale, Associate Nurse Consultant (Editor-in-chief)

Ms. CHUNG Ying Ying Nurse Consultant (Contributing editor)

Dr. LEUNG Man Fuk, Edward

Consultant



Announcement:

Overseas Conference

 International Continence Society (ICS) Annual Meeting 2023, Toronto (27-29 September, 2023)

Contents:

The Hong Kong Continence Society Events

- Symposium on Advanced Continence Care on 25-July-2023
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- 2. Facebook Live Community Talk: Urinary and Bowel Care for Children on 19th-August-2023 **P.2**
- 2023 Annual Scientific Meeting cum 29th AGM & 149th Council Meeting on 23rd-Sepember-2023 P.3
- Clinical Expert Article: Contemporary Surgical Management of Benign Prostate Hypertrophy P.4

Activities Highlights:

- Member Ms. CHUNG Ying Ying as invited speaker by Hong Kong Association of Gerontology for 11th Quality Care in Aged Homes on 21st-June-2023 **P.7**
- Members Ms. CHAN Chi Man and Ms. Arale WONG had oral presentation in the 28th Hong Kong Urological Association Annual Scientific Meeting 2023 on 19th November-2023 P.7

Symposium on Advanced Continence Care on 25-July-2023



Dr. Cecilia CHEON shared the surgical management for Stress Urinary Incontinence & Ms. Arale WONG shared the nursing management of Overactive Active Bladder



Dr. Judy HVNG, Associate Consultant (Surgery) & Paediatric experts delivered an online public talk on Child's Vrinary & Bowel problems

2023 Annual Scientific Meeting cum 29th AGM & 149th Council Meeting on 23rd-Sepember-2023







Members participation at registration counter and lecture hall... What a full house!



We are delighted to have Ms. WONG Tin Ying (Paediatric Surgery RN) at left side photo, Ms. Brigitte FUNG (Allied Health Coordinator, Physiotherapist) in the middle photo, Dr. Wilson LAM (Associate Consultant (Urology) at rightupper photo & Ms. YEUNG Siu Ying (Geriatric & Rehabilitation Service APN) at right-lower photo to share with us on updated Continence Care in their specialties



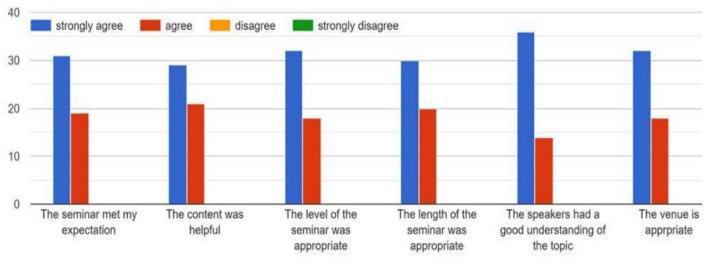






Election of next-term Councils & Co-opted members in Council Meeting. Special thanks to Dr. LEVNG (President), Dr. TONG (Treasurer) & Ms. Maggie LAM (Secretary) 's contribution to successes





How would you rate the seminar in terms of the following? (N=50)





Contemporary Surgical Management of Benign Prostate Hypertrophy

By Dr. LAM Wing Chung Wilson, Associate Consultant (Urology)

Benign prostate hypertrophy (BPH), prevalent among aging men, leads to urinary symptoms as the prostate enlarges. Medical treatments, including alpha-blockers and 5-alpha-reductase inhibitors, alleviate symptoms and reduce the prostate size [1]. However, when symptoms further progress or when further complications develop such as acute urinary retention, surgical treatment has to be taken into consideration.

The history of BPH surgery has evolved from open prostatectomy to endoscopic surgery and even office-based day surgery, reflecting a quest for safer and minimally invasive solutions

Transurethral Resection of the Prostate (TURP)

It remains the current standard for prostate size 30-80ml [2], providing prompt relief but with potential complications like bleeding, systemic absorption of irrigation fluid and sexual side effects such as retrograde ejaculation [3].

Enucleation of Prostate

Prostate enucleation, utilizing bipolar energy or laser energy like Holmium or Thulium, removes prostate adenoma along the natural anatomical plane, offering a safe alternative with similar efficacy and safety to TURP [4,5]. There is theoretically no prostate size limitation. However, enucleation technique has an intrinsically steeper surgeon's learning curve comparing with TURP.

Aquablation

Aquablation is an image guided robotic high-velocity waterjet ablation technique. It offers a precise remove of prostate tissue under real-time transrectal ultrasound guidance. Current evidence indicates its mid-term efficacy is non-inferior to TURP with a low incidence of retrograde ejaculation [6]. However, there is lack of long-term follow-up data.

Convection water vapour energy ablation

It uses radiofrequency energy to create thermal energy in the form of water vapour that causes prostate tissue necrosis. It can be done under local anaesthesia in an office-based setting, showcasing efficacy with minimal impact on sexual function [7]. However, there is currently no evidence of direct comparison against a reference technique such as TURP.

Prostatic Urethral Lift

It utilizes tiny permanent implants to compress the prostate tissue. offers a minimally invasive approach with improvements in symptoms and flow rates [8]. It can be done under local anaesthesia in an office-based setting. Its advantage lies in preserving sexual function when comparing with TURP [9]. However, again there is lack of long-term follow-up data to evaluate the durability comparing with other techniques.

Prostate Artery Embolization

Prostate Artery Embolization (PAE) is an endovascular treatment which selectively embolize prostate arterial supply, resulting in shrinkage of prostate. PAE is minimally invasive and can be done as day procedure with local anaesthetics. It demonstrates patient-reported outcome measures non-inferior to TURP. However, objective outcomes, such as urodynamic results, prostate volume reductin, remain inferior to TURP [9].

In conclusion, BPH management involves a diverse array of interventions, ranging from traditional to innovative approaches, each tailored to patient needs. The historical evolution of surgical techniques reflects a continual pursuit of optimal outcomes with minimal invasiveness. A nuanced understanding of prevalence, clinical assessments, and available medical treatments guides healthcare professionals in providing personalized and effective care for individuals affected by BPH.

Reference:

- 1. Roehrborn, C.G., et al. The effects of dutasteride, tamsulosin and combination therapy on lower urinary tract symptoms in men with benign prostatic hyperplasia and prostatic enlargement: 2-year results from the CombAT study. J Urol, 2008. 179: 616.
- 2. EAU guideline 2023: Management of non-neurogenic male LUTS.

- 3. Cornu, J.N., et al. A Systematic Review and Meta-analysis of Functional Outcomes and Complications Following Transurethral Procedures for Lower Urinary Tract Symptoms Resulting from Benign Prostatic Obstruction: An Update. Eur Urol, 2015. 67: 1066.
- 4. Higazy, A., et al. Holmium laser enucleation of the prostate versus bipolar transurethral enucleation of the prostate in management of benign prostatic hyperplasia: A randomized controlled trial. Int J Urol, 2021. 28: 333
- 5. Heidar, N.A., et al. Laser enucleation of the prostate versus transurethral resection of the prostate: perioperative outcomes from the ACS NSQIP database. World J Urol, 2020. 38: 2891.
- 6. Gilling, P.J., et al. Randomized Controlled Trial of Aquablation versus Transurethral Resection of the Prostate in Benign Prostatic Hyperplasia: One-year Outcomes. Urology, 2019. 125: 169.
- 7. McVary, K.T., et al. Erectile and Ejaculatory Function Preserved With Convective Water Vapor Energy Treatment of Lower Urinary Tract Symptoms Secondary to Benign Prostatic Hyperplasia: Randomized Controlled Study. J Sex Med, 2016. 13: 924
- 8. Perera, M., et al. Prostatic urethral lift improves urinary symptoms and flow while preserving sexual function for men with benign prostatic hyperplasia: a systematic review and meta-analysis. Eur Urol, 2015. 67: 704.
- 9. Knight, G.M., et al. Systematic Review and Meta-analysis Comparing Prostatic Artery Embolization to Gold-Standard Transurethral Resection of the Prostate for Benign Prostatic Hyperplasia. CardioVasc Int Radiol, 2021. 44: 183.

香港老年學會

Hong Kong Association of Gerontology for 11th Quality Care in Aged Homes on 21st-June-2023





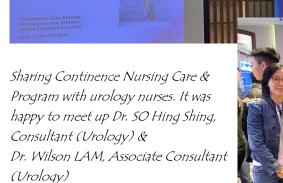
第11- 届安老院舍優質照護研討會2023 – 院舍優質服務指標 Quality Care in Aged Homes

時間:下 對象:安	下午2時3 安老院舍	月21日(星期二) 0分至5時30分 或長者服務同工;各界友好 otel ICON (香港九龍尖沙咀東部科學)	CNE, CPD(SW): 3 CPD(OT), CPD(PT): 待批 館道17號)	Ms. CHVNG Ying Ying (Nurse Consultant, in Continence Care) had
程序	(大會主持:陳靜宜 老年學會總監)			contributed in aged homes quality
(—) 2:3	30-2:35	歡迎辭 梁萬福醫生 香港老年學會會長		care seminar and delivered continen
專是	題講座	(講座及答問主持:梁萬福醫生 老年學會會長)		care lecture
(二) 2:4	40-3:10	安老院舍長者常見皮膚疾病及診治 Diagnosis and Management of Common Skin Diseases in Residents of RCHEs 周志榮醫生 皮膚及性病科專科醫生		
(三) 3:1	10-3:40	安老院舍長者腸道及泌尿系統疾病管理 Management of Bowel and Urinary Disorders in RCHEs 鍾欣欣女士 九龍東醫院聯網理遺科顧問護師		
(四) 3:4	40-4:10	深造傷口護理管理Advances in Wound Care Management 汪敬慈女士 港島西醫院聯網臨床護理導師		
(五) 4:1	10-4:30	小休(茶點)		
(六) 4:3	30-5:00	以「安老院舍評審計劃」提升院舍質素之 Review of Quality Improvement with R Accreditation in Hong Kong 趙迪華女士 香港老年學會副總監		
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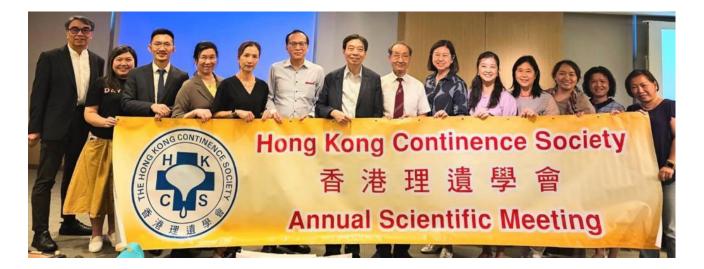




28TH ANNUAL

SCIENTIFIC MEETING

ROLOGY NURSING CHAPTER



2023/2024

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