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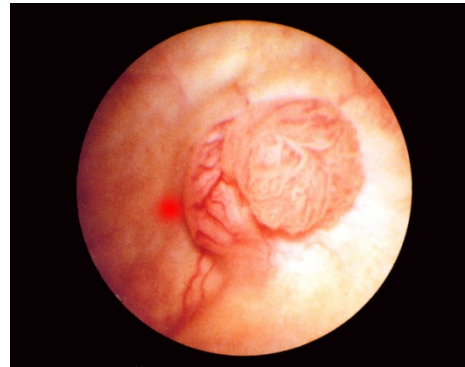
RECOVERY FROM TELESCOPIC BLADDER SURGERY

FREQUENTLY-ASKED QUESTIONS

What should I expect after my operation?

Some things are to be expected after telescopic surgery to the bladder:

- there may be bleeding and/or blood clots in your urine for a few days after the procedure. It may clear but then begin again. This can occur for up to three weeks after the operation and is known as **secondary haemorrhage**;
- it will be uncomfortable or even painful when you pass urine. This is to be expected because there has been a telescope in the water pipe (urethra);
- if there was a need to stretch the urethra to allow passage of the telescope, there may be some bleeding from the urethra itself when you pass urine or immediately afterwards. This bleeding invariably settles; and
- you may feel tired or “washed out”.



Remember that, although the operation was a telescopic one, the body still reacts to it in the same way it would if an incision had been made.

Is there any way I can prevent these problems?

Yes, there is:

- drink plenty of fluids (at least two litres daily) for the first two to three days. This will dilute your urine and reduce the chance that it will be uncomfortable when you pass urine. It also helps to keep the bladder flushed so that blood clots are less likely to develop and the urine continues to flow easily;
- take paracetamol for the first 24 hours or so (unless there is a medical reason why you should not). This will help to make passing urine more comfortable;
- if you have been given a course of antibiotics to take home with you, it is important that you complete the course; and

- try to remain active, resuming normal activities as soon as you feel able. This is likely to promote a more rapid recovery. You may find you need slightly more sleep than usual for the first few days after your discharge.

Are there any other things I should look out for?

Even if there is blood in your urine, it is unlikely that any discomfort in passing urine is due to infection. However, if you develop a fever (over 37.5°C), or if the urine becomes cloudy and thick, you could have an infection. In this event, you should contact your GP surgery so that they can consider whether you need antibiotics.

If you pass more than the occasional small blood clot, you should increase your fluid intake (by drinking a litre of water over a couple of hours) and aim for a fluid intake of three litres over the next 24 hours. This will help to flush through any continued bleeding.

If it becomes very painful to pass clots or difficult to pass urine at all, you should contact for GP surgery straight away so that they can assess your condition.

If you are unable to contact your GP, please feel free to telephone your urology specialist nurse (during office hours) or the urology ward of your local hospital (outside normal working hours).

Disclaimer

This booklet includes advice from specialists, the British Association of Urological Surgeons, the Department of Health and other sources. You should read this booklet with any advice your GP or other healthcare professional may already have given you. Alternative treatments can be discussed in more detail with your urologist or specialist nurse.

While we have made every effort to be sure the information in this booklet is accurate, we cannot guarantee there are no errors or omissions. We cannot accept responsibility for any loss resulting from something that anyone has, or has not, done as a result of the information in this booklet.

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