## Open Prostatectomy

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n this series of articles I am going to show you some of the exhibits contained in the BAUS Virtual museum of the History of Urology which is part of the BAUS website (www.baus.org.uk). In the last article I asked, "who did the first suprapubic prostatectomy?" I expect some thought it was Sir Terrence Millin and some Sir Peter Freyer but the answer isn't as straightforward as you may think. Firstly, let me clarify the question. "Who did the first complete open prostatectectomy for the treatment of benign prostatic hyperplasia (BPH), accessing the prostate above the pubic bone?"

In 1827, whilst removing a bladder stone by the suprapubic route, Jean Amussat (1796-1856) of France, noticed a round tumour projecting from the bladder neck and snipped it off with scissors. This was almost certainly the middle lobe of the prostate, but it wasn't done deliberately for the treatment of BPH, so I'm not going to count that! (By the way, you may want to note that this was done prior to the use of anaesthetic!)

In 1880, the Austrian surgeon Leopold von Dittel (1815-1890) similarly cut off a middle lobe that got in the way whilst placing a suprapubic catheter. In 1885 he deliberately reopened the bladder of a doctor who was suffering from BPH and could not cope with urethral or suprapubic catheters. He removed the lobe with a snare; but this was only a partial prostatectomy – albeit deliberate. The patient died of sepsis six days later; this was of course before antibiotics.

The first surgeon to carry out this procedure in Great Britain was Arthur McGill (1850-1890) in Leeds in 1887 (Figure 1). It is clear that in the 1880's McGill completely enucleated the prostate purposefully removing both the middle and lateral lobes in some patients. However, at about the same time and completely independently, the American William T Belfield (1856-1929) was doing this in Chicago (Figure 2). In his 1890 paper Belfield credited McGill with the concept of total enucleation. Eugene Fuller (1858-1930) of New York published a clear method of transvesical complete enucleation of the benign prostate in 1895 but I think it is reasonable to say that McGill and Belfield were already doing this in some cases and partial prostatectomy in others.

Then it becomes interesting! Sir Peter Freyer published his paper on 'Total Extirpation of the Prostate for Radical Cure of Enlargement of That Organ' in July 1901 claiming it as his idea. There was furious correspondence from America and Leeds refuting this. This arguing went on for years. It is however, fair to say that Sir Peter Freyer, by publishing large series with low mortality (1625 cases with a death rate of only 5%), popularised this procedure. Hence it became known as the Freyer Operation (Figure 2).

In 1945, Terence Millin (Figure 3) carried out his first retropubic prostatectomy approaching the prostate adenoma via the Cavern of Retzius rather than through the bladder. However, he was not the first person to do this. In 1908 van Stockum of Holland performed the first retropubic prostatectomy, but he did not pursue this and the idea did not catch on. But like Freyer before him it was Millin that popularised this procedure which became the standard technique and indeed remains so for the open approach.

I intend to elaborate on the stories of Millin and McGill in future articles but what fascinates me about this story is the battle for precedence; who came first, whose operation is it? The answer is of course not entirely clear and as I suggested at the beginning depends very much on what question you ask. McGill was probably the first to purposely enucleate the whole prostatic adenoma using the transvesical technique, but it was Fuller who clearly described this. It was Freyer who made this a globally popular procedure just as Millin did later with the retropubic technique.

Next time, in a similar story of precedence, did La Peyronie describe his eponymous disease or not?



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Figure 1: Arthur McGill.

Figure 3: Sir Terence Millin.



Figure 2: prostate enucleated by Freyer.