NAME: ADUGBO.E. JANET

MATRIC NO: 17/MHS03/002

QUESTIONS:

1. The different disorders of the prostate gland
2. Their etiology
3. The therapeutic interventions as well as surgeries
4. The nursing care and client teaching in the different conditions.

**BENIGN PROSTATE HYPERTROPHY (BPH)**

BPH is an enlargement of the prostate gland that constricts the urethra causing urinary symptoms. It is common with men above 50 years of age. It is not cancerous. Due to the enlargement of the prostate, urinating can be difficult or dribbling of urine after voiding can occur, the urge to urinate is increased often at night.

**Eitology**

Auto-immune response, Arteriosclerosis, Infection, Metabolic or nutritional disturbances, Tumour, Aging, Hormonal disturbances/ activities ( ↓Androgen with ↑Oestrogen)

**Therapeutic interventions and surgeries:**

1. Drug therapy (eg, Alpha-blockers, 5-alpha-reductase inhibitors) for patients with bothersome , moderate to severe lower urinary tract symptoms
2. Surgical approaches include prostatectomy or partial prostatectomy and can be done with different sites which include :
3. Transurethral resection: removal of enlarged portion of prostate by inserting electrical cutting loop through the urethra
4. Suprapubic (Transversical): incision into bladder to remove prostate gland
5. Perineal: removal the gland through perineum
6. Retropubic: incision through lower abdominal wall

**Nursing care :**

1. Preparation for surgery:
2. Informed consent
3. Explaining procedure to patient
4. Monitoring vital signs
5. Talking with patient to calm anxiety
6. Administration of medications
7. Care after surgery:
8. Monitoring vital signs
9. Wound dressing if and when necessary
10. Observation of intake and output chart
11. Administration of analgesics when necessary.
12. Monitoring intake and output chart

**Client Teaching:**

1. Inform patient to not allow bladder to get too full, to urinate freely and often
2. Do not drink too much water or drinks containing caffeine
3. Do not drink anything for an hour or two before going to bed
4. Don’t self-medicate or take over the counter drugs without asking a professional.

**ACUTE BACTERIAL PROSTATITIS**

This is when the prostate gland becomes suddenly inflamed as a result of bacterial infection.

**Etiology**

Any bacteria that causes Urinary tract infection such as: Proteus species, Klebsiells species, Escherichia coli, or sexually transmitted disease such as: Chlamydia, Gonorrhoea

**Therapeutic interventions and surgeries:**

1. Antibiotics for 4-6 weeks depending on recurrent episodes and on the bacteria causing the condition
2. Alpha-blockers to help relieve symptoms and relax bladder muscles to decrease urinary discomfort eg, Doxazosin, Terazosin and Tamsulosin
3. Pain relievers such as Acetaminophen ( Paracetamol)and Ibuprofen.

**Nursing care :**

1. Administration of drugs
2. Health education about condition
3. Monitoring vital signs
4. Monitoring intake and output chart.

**Client Teaching:**

1. Avoid bicycling and wearing padded shorts to decrease pressure on prostate
2. Avoid alcohol, caffeine and foods that are spicy and acidic
3. Sit on a pillow or donut cushion
4. Take warm baths

**CHRONIC BACTERIAL PROSTATITIS/ CHRONIC PELVIC PAIN SYNDROME**

This is when the prostate gland becomes inflamed due to an infection that comes back again and again.

**Etiology**

Any bacteria that causes Urinary tract infection such as:

Proteus species,

Klebsiells species,

Escherichia coli,

or sexually transmitted disease such as:

Chlamydia, Gonorrhoea

**Therapeutic interventions and surgeries:**

1. 5-Alpha reductase inhibitors such as finasteride (proscar) and dutasteride (avodart)
2. Nonsteroidal anti-inflammatory drugs such as ibuprofrn, aspirin an naproxen sodium
3. Muscle relactant
4. Relaxation exercise
5. Acupuncture
6. Kegel exercise
7. Surgery may be required to treat retention of caused by chronic bacterial prostatitis. Surgically removing scar tissue in the urethra improves urine flow and urinary retention

**Nursing care:**

1. Administration of drugs

2. Health education about condition

3. Monitoring vital signs

4. Monitoring intake and output chart.

**Client Teaching:**

1. Avoid bicycling and wearing padded shorts to decrease pressure on prostate

2. Avoid alcohol, caffeine and foods that are spicy and acidic

3. Sit on a pillow or donut cushion

4. Take warm baths

5. Increase intake of water to help flush out bacteria from bladder

**PROSTATE CANCER/ PROSTATIC CARCINOMA**

This is the development of cancer cells in the prostate gland; some cancers grow very slowly while others are aggressive and spread quickly to other organs.

**Etiology**

It doesn’t have a clear etiology but it begins when some cells in the prostate become abnormal and mutation in the abnormal cell DNA causes cell to grow and divide rapidly than normal. The abnormal cells continue living while the other cells die. Accumulation of the abnormal cells becomes a tumour that grows to invade normal tissue.

**Therapeutic interventions and surgeries:**

1. Radiation therapy to kill cancer cells
2. Prostate cancer surgery ( radical prostatectomy)
3. Hormone therapy ( use of drugs to shrink or slow growth)
4. Chemotherapy ( to kill fast growing cancer cells)
5. Cryotherapy ( kills cancer cells by freezing the cells)

**Nursing care :**

1. Preparation for surgery:

a. Informed consent

b. Explaining procedure to patient

c. Monitoring vital signs

d. Talking with patient to calm anxiety

2. Administration of medications

3. Care after surgery:

a. Monitoring vital signs

b. Wound dressing if and when necessary

c. Observation of intake and output chart

d. Administration of analgesics when necessary.

4. Emotional support

**Client Teaching:**

1. Healthy diet full of fruits and vegetables
2. Healthy food over supplements
3. Exercise
4. Maintain healthy weight
5. Eat whole grain instead of processed grains
6. Reduce and eventually stop eating high fat dairy products and meats