

HoLEP Procedure Post-Operative Instructions

Following your HoLEP (Holmium Laser Enucleation of the Prostate) procedure, please review the information below carefully. These guidelines are designed to support a safe recovery and optimal healing.

Activity & Exercise

Rest

- Take it easy for the first two weeks after surgery.
- You will require at least **4–5 days** off work. Longer may be needed depending on your occupation.

Walking

- Gentle walking is encouraged and may help recovery.

Lifting & Strenuous Activity

- Avoid **heavy lifting (over 4 kg)** for **6 weeks**.
- Avoid strenuous exercise and straining during bowel movements for **2 weeks**.

Pelvic Floor Exercises

- Avoid pelvic floor exercises for the first **7 days** after surgery.

Sexual Activity

- Avoid sexual activity for 2 weeks following the procedure.

Flying

- Avoid flying for **10 days** after surgery.

This is due to:

- Lifting heavy luggage
- Increased risk of bleeding during air travel
- Risk of urinary retention from blood clots in the bladder

Driving

You may resume driving **after discharge**, once:

- The effects of anaesthesia have worn off, and
- You feel comfortable and confident to drive safely.

Please also consider:

- Possible side effects of prescribed medications
- Avoid driving if you are experiencing pain or discomfort
- Only drive when you feel fully capable of doing so safely

Medication Instructions

Pain Relief

- You may be prescribed mild pain relief. Take medications as directed and only if required.
- Paracetamol or ibuprofen may be used for mild discomfort unless contraindicated.

Bowel Care

- Bowel medication is often provided in hospital to prevent straining.
- You may need to continue this at home for a few days after discharge.

Antibiotics

- If prescribed, complete the full course even if you feel well.

Blood-Thinning Medications

- If you were taking blood-thinners prior to surgery, follow your doctor's instructions regarding when to restart them.

Regular Medications

- Continue your usual medications unless advised otherwise.

👉 Contact your doctor or pharmacist if you experience side effects such as nausea, dizziness, rash, or unusual bleeding.

Urinary Symptoms

Blood in the Urine

- It is normal to see blood in your urine for several weeks after surgery.
- Bleeding may occur intermittently.

Burning or Stinging

- Burning or stinging during urination may last 2–3 weeks and does not usually mean infection.
- Ural (available over the counter at pharmacies) may help relieve symptoms.

Frequency & Urgency

- Urinary frequency, urgency, and waking at night to urinate take time to improve.
- Most patients notice improvement within 3 months, though it may take 6–12 months for symptoms to fully settle.

Incontinence

- Temporary leakage of urine may occur.
- This usually improves within 3 months with pelvic floor exercises.
- Dr Sethi's team may refer you to a pelvic floor physiotherapist if required.

Retrograde Ejaculation

- Retrograde (dry) ejaculation is common ($\approx 90\%$), expected, and permanent if it occurs.
- This outcome is not harmful.

Diet & Fluids

Fluids

- Drink **1.5–2 litres** of fluid daily for several days after discharge to help flush the bladder and reduce infection risk.

Diet

- Eat a balanced diet with adequate fibre to prevent constipation.

When to Seek Medical Attention

Please attend your nearest emergency department if you:

- Have severe pain not controlled by medication
- Are unable to pass urine
- Develop a high fever or feel unwell
- Experience heavy or ongoing bleeding

Follow-Up

Our rooms will contact you to arrange a follow-up appointment with your urologist, usually around four weeks after surgery. Pathology results will be discussed at this appointment.

Need Help or Have Questions?

Practice Nurse: (03) 9419 4824

Urologic Rooms: (03) 9113 9333

Wishing you a smooth recovery.

Urologic