

**Thulium Laser Enucleation of the Prostate in Patients on Anticoagulant or  
Antiaggregant Therapy.** MP-13.14

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**Introduction and Objective:**

Oral anticoagulation or antiaggregation are considered a strict contraindication to transurethral resection of the prostate (TURP). In recent years, however, safe and effective surgical alternatives such as Thulium laser enucleation of the prostate (Thu-LEP) have emerged. We evaluated the safety and efficacy of ThuLEP in patients on anticoagulation or antiaggregation with significant obstructive symptoms secondary to prostatic hypertrophy (BPH) refractory to medical therapy.

**Materials and Methods:**

From September 2011 to February 2012 we reviewed 8 patients with a mean age of 66.8 years who had symptomatic BPH and were on chronic oral anticoagulant or antiaggregant therapy. Mean preoperative prostate size estimated by transrectal ultrasound was 56.4 cc. A total of 2 patients underwent ThuLEP with high dose of low molecular weight heparin and the remaining 6 with antiplatelet therapy. All patients were assessed preoperatively, and 7 and 30 days after surgery.

**Results:**

ThuLEP was performed successfully in all patients. The mean enucleation time was 50.5 min. The patients' preoperative mean hemoglobin concentration was 12.4 g/dl, and on the first postoperative day it was 12.1 g/dl. There were no cardiac complications in either the perioperative or the postoperative period.

No patient required reintervention for hemostatic purposes. No episodes of clot-related acute urinary retention occurred after removal of the bladder catheter.

**Conclusions:**

Despite the high number of complications related to cardiac problems that suspension of these drugs causes, ThuLEP, carried out during anticoagulant or antiaggregant therapy, was easible and without complications.