Surgical Drainage of a Prostatic Abscess through TURP

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Resumo

A 69-year-old male presented to Emergency Department with a 1-week history of intense perineal pain, fever and dysuria. The patient appeared very ill and toxic on physical examination. A very painful prostate was noted on DRE without fluctuation sign however. Fever and tachycardia were noted too. He had a personal history of hypertension, diabetes and LUTS related to BPH. The laboratory analysis showed serum leukocytosis and pyuria. Bilateral rounded areas with enhancing wall were demonstrated in initial CT scan - suggesting Prostatic Abscess. Despite initial therapy the patient’s fever persisted and a TURP drainage was indicated. During the TURP, a spontaneous abscess rupture occurred and the procedure was very brief due to the patient condition. After this, a complete improvement of symptoms was achieved. The antibiotic therapy was kept until postoperative day 7 when a control CT have demonstrated a complete resolution of the collection. Six months after, patient still satisfied with his urinary pattern and no other procedures were necessary (1).


REFERÊNCIAS