[English]

This video does not have sound.

Overview

This video shows an endoscopic surgery, holmium laser enucleation of the prostate (HoLEP), for benign prostatic hyperplasia (BPH).

In HoLEP, the adenoma is dissected using a holmium laser, enucleated into the bladder, and then morcellated and suctioned with a morcellator. This technique results in relief of urinary obstruction.

Advantages of this procedure include less bleeding, safer application for large BPH, shorter postoperative hospital stay, and substantially lower likelihood of recurrence, compared with conventional endoscopic procedures.

At our institution, HoLEP is performed by a characteristic procedure, in which, using dissecting forceps developed in Japan, initially the apex of the prostate is dissected circumferentially, and then the adenoma is enucleated as a lump using the holmium laser, and pushed into the bladder. This procedure may enable prevention of urinary incontinence and reduction of operation time.

Captions for the video

- No.1 [00:36] The narrow annulus urethralis is incised.
- No.2 [00:44] There is a difficulty in inserting the resectoscope into the bladder because of the presence of median lobe hypertrophy.
- No.3 [00:56] Bilateral ureteral orifices are identified.
- No.4 [01:07] The urethra is marked.
- No.5 [01:18] At the 12 o'clock position, resection is performed with a loop electrode.
- No.6 [01:33] The urethral mucosa is dissected with the blade type electrode.
- No.7 [01:43] The dissection is continued with a curette.
- No.8 [01:55] The laser power is kept low at 2 J/10 Hz, creating a nearly-circumferentially dissected surface.
- No.9 [02:22] The laser energy is increased to 2.6 J/30 Hz.
- No.10 [02:33] The bladder cavity is reached at the 12 o'clock position.
- No.11 [02:52] The left lobe is separated.
- No.12 [03:02] The left lobe at the apex of the prostate is separated.
- No.13 [03:12] The verumontanum can be seen.
- No.14 [03:20] The right lobe is separated and the resulting surface is attached to the above-mentioned dissected surface at the 12 o'clock position.
- No.15 [03:41] The bladder neck is separated.
- No.16 [03:54] The median lobe is separated.
- No.17 [04:53] The adenoma, as a lump, is pushed into the bladder.
- No.18 [05:06] Morcellation is performed.
- No.19 [05:21] The operation is complete.