Infection
1 in 100 patients can develop a severe infection (shaking, chills and rigors with a flu like illness). If this was to occur please go to your GP for some more antibiotics or alternatively please attend the A&E.

Pain
Dull ache in the perineum is common, requiring paracetamol. This subsides spontaneously.

Bleeding
Bleeding can occur in the urine, ejaculate and, rarely, from the rectum. This will settle spontaneously. If the blood in the urine persists for many days or if you are experiencing passage of clots then we recommend you consult your GP.

Results
The biopsy samples will be examined by the pathologists and the results are usually available after 2–3 weeks. You will have an appointment made to come to the cancer centre (even if there was no cancer found) for these results.

Anti–coagulation (blood thinning)
If you are on any medication for thinning your blood you should tell your consultant when you are offered template biopsies. There is a risk of bleeding when the biopsies are taken. Commonly used blood thinning drugs include Aspirin, Warfarin and Clopidogrel. Aspirin and Clopidogrel should be stopped 7 days in advance. Warfarin should be stopped four days in advance. Speak to your GP if you are unsure.

The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk/health-talks.htm or call 0121 371 4957.

The Urology Department
Queen Elizabeth Hospital Birmingham
Mindlesohn Way, Edgbaston
Birmingham, B15 2GW
Specialist Nurse Office
Telephone: 0121 371 6926

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To see all of our current patient information leaflets please visit www.uhb.nhs.uk/patient-information-leaflets.htm
What are template prostate biopsies?
This is a way of taking biopsies (tissue samples) from your prostate under a general anaesthetic via the perineum (area between the scrotum and anus) allowing for a greater amount of biopsies to be taken with greater accuracy.

Is there an alternative?
Prostate biopsies are most commonly taken via the rectum (back passage) using local anaesthetic for pain control and trans–rectal ultrasound imaging (TRUS) for guidance. Most men will have already had this method of biopsy prior to being offered template biopsies.

Why are you being offered template prostate biopsies?
If you have a raised Prostate Specific Antigen (PSA) blood test and previous prostate biopsies that have been negative for prostate cancer you may be offered template prostate biopsies to sample more of the prostate more accurately. This will allow greater certainty about whether you have a prostate cancer or not. Template prostate biopsies are usually performed after a MRI scan which can show abnormal areas within the prostate which can be targeted at time of biopsy. A second reason for offering a template biopsy is for known patients with prostate cancer under active surveillance. Again, as explained above, we can get a greater amount of information about your cancer which will help you decide whether to continue with surveillance or whether to have a treatment.

A third indication would be in some patients where a MRI scan has revealed a lesion which will be inaccessible for biopsy by the routine technique. Biopsies via the rectum are limited to accessing the area of the prostate which is closest to the rectum. If an MRI scan indicates there is an area of suspicion at the front of the prostate, this can be targeted using this approach.

The procedure
You will be admitted on the day of your biopsies. The surgeon will answer your questions and you will need to sign a consent form giving your permission for the biopsies to be taken. You will be taken to the operating theatre where the surgeon will perform the procedure. You will have a general anaesthetic (be asleep) for the whole of the procedure. Whilst you are asleep the biopsies are taken using a biopsy needle which is inserted through the skin in the perineum (the area between the scrotum and the anus). A metal grid attached to the operating table ensures that the needles are inserted into the correct area of the prostate gland.

The surgeon will use the TRUS scanner into the rectum to identify the prostate gland and then the location of the needles within the prostate gland.

In most cases patients will be allowed home later on the same day when they have recovered from the anaesthetic or the following morning. You will not be able to drive for 24 hours after the anaesthetic so alternative travel arrangements will be needed.

After discharge you should avoid heavy lifting and rigorous exercise for 2–3 days. After this period normal activity can be resumed. Alcohol should be avoided for 24 hours.

Urinary retention
Some patients will have more severe side effects after treatment. 1 in 25 patients may be unable to empty their bladder satisfactorily after their biopsy and require a catheter.

The symptoms of this are a dull ache in the lower abdomen and a feeling of wanting to urinate but being unable to do so. If this happens you should attend your local accident and emergency department to be assessed by the doctors.

A catheter will be inserted into your bladder through your penis to relieve the symptoms. This will need to stay in place for a few weeks until the prostate swelling reduces. It is unlikely that it will need to stay in longer than this.